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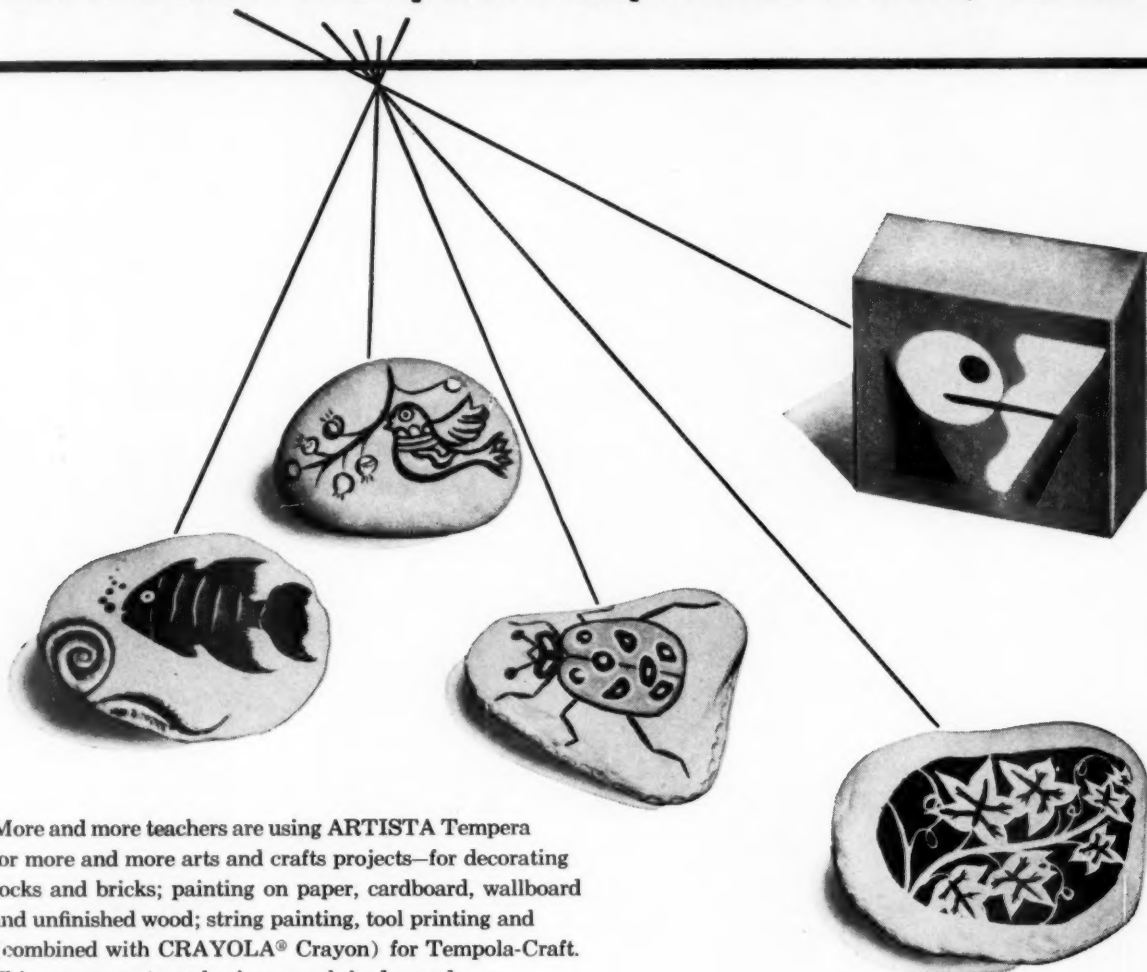
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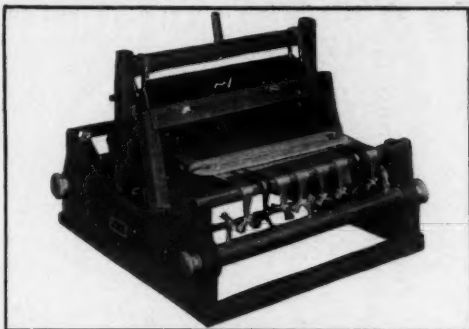


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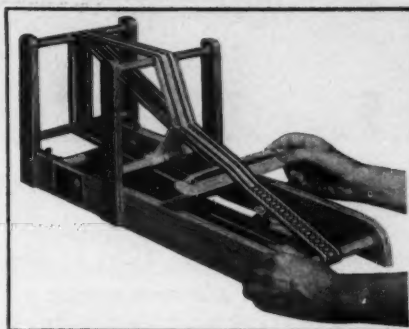
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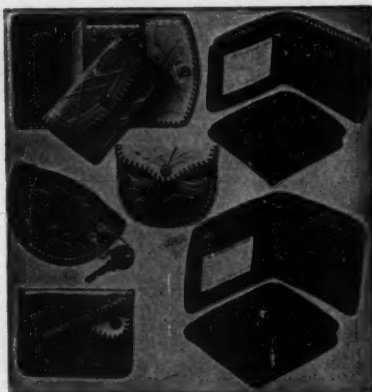
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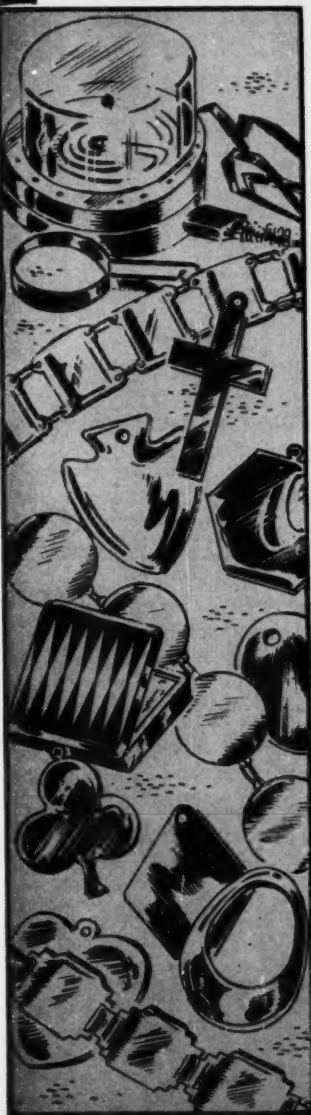
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THE AMERICAN JOURNAL of OCCUPATIONAL THERAPY

Official Publication of the American Occupational Therapy Association

Buyers' Guide

March-April

1955

Vol. IX, No. 2, Part II

VISUAL AIDS FOR OCCUPATIONAL THERAPY

1953-54

HAROLD SHALIK, O.T.R.

FOREWARD

This list replaces the April, 1951, American Occupational Therapy Association bibliography of slides and films. This present bibliography contains films and filmstrips from most available known sources as of November 15, 1954. It was revised and compiled for the American Occupational Therapy Association and utilizes the same format as that used in the bibliography "Visual Aids for Occupational Therapy," which appeared in the March-April, 1953, American Journal of Occupational Therapy, Volume 7, Number 2, Part 2. The 1953 bibliography is available in reprint form from the American Occupational Therapy Association, 33 West 42nd Street, New York, N. Y., at fifteen cents per copy. The two bibliographies are intended to be used together to provide a complete listing of visual aids available for use in all phases of occupational therapy.

Films and filmstrips herein included do not represent endorsement by the American Occupational Therapy Association, but rather indicate their availability only. Sources listed should be contacted for any further information relative to a particular visual aid. The American Occupational Therapy Association does not sell or rent films, other than those specifically designated in the listing.

INSTRUCTIONS FOR USING THE BIBLIOGRAPHY

The bibliography is divided into three parts. Part I contains medical films available through the year 1953. Part II lists medical films made available during the year 1954. Part III lists craft films available through the year 1953.

Films, both silent and sound, and filmstrips accompanied by text or captions, are listed. A slightly different system is used for giving information

for films than for filmstrips, as follows:

FILMS: Read as follows, for Parts I and II:

TITLE: source; running time; rental fee; medical area. Additional material when necessary included in brackets. When information is not available a (—) is used instead.

FILMSTRIPS: Read as follows, for Parts I and II:

***TITLE:** source; number of frames; sale price; medical area.

Films and filmstrips listed in Parts I and II are annotated where possible, but those in Part III are not, and no areas are listed for them.

The coding for sources and medical areas is the same as that used in "Visual Aids for Occupational Therapy."

Source materials are included at the end of the listing. They are coded within the listing (e.g., 3. A NEW BEGINNING: NYFL; etc.). NYFL stands for New York University Film Library, and by referring to the alphabetical listing of code letters under "SOURCES" the full address can be obtained.

Running time is indicated with a number followed by a ('), (e.g., 3. A NEW BEGINNING: NYFL; 30'; etc.). The 36' means 36 minutes running time.

Rental fee refers to one day rental, and sources should be contacted for rental of more than one day. Rates usually are less for two or more days. Rates apply to days of *actual* showing only. The purchaser usually pays for transportation and insurance of films both ways, whether there is a rental charge or not. Rental rates are subject to change without notice.

The **Area** the films cover are coded from "A to R," and are included at the end of the listing (e.g., 3. A NEW BEGINNING: NYFL; 36'; \$2; P.). P alphabetically listed under "MED-

ICAL AREAS" would stand for "Rehabilitation" indicating that this film relates to some phase of rehabilitation.

Index at End of Listing:

SOURCES. Each medical source is followed by the numbers of the films within the listing which are available from this source.

MEDICAL AREAS. Listed are those broad categories in which the occupational therapist has an interest. Following each area is a list of the numbers of the films within the listing which come under the area.

All films listed are 16 mm, sound, black and white, except as otherwise indicated.

Filmstrips are marked with an (*).

BIBLIOGRAPHY

PART I

Medical Area

1. A DAY IN THE LIFE OF A CEREBRAL PALSID CHILD: NSCCA; 30'; \$3.50; BB (color). Describes complete picture of 24 hour training and treatment required in rehabilitation of cerebral palsied children.
2. A LONG TIME TO GROW: PART I—TWO AND THREE YEAR OLDS IN NURSERY SCHOOL: NYFL; 35'; \$6; N (part 2, "Four and Five Year Olds," in preparation). Shows children learning and growing.
3. A NEW BEGINNING: NYFL; 36'; \$2; P. "Rehabilitation of a paraplegic miner and his final re-employment. Follows him through work at Institute of Physical Medicine and Rehabilitation with emphasis on complete services (ISWC)."
4. A NEW HORIZON: NFIP; 20'; Free; P. Physical medicine rehabilitation in cases of poliomyelitis.
5. A PLACE IN THE SUN: NSCCA; 23'; \$3.50; BB (color). Follows a C.P. child from early diagnosis to final departure at the California State School for Cerebral Palsied Children at Redwood City.
6. *A STEP-SAVING U KITCHEN: PL; 40f; \$4.50; AAA (color). Shows a kitchen designed according to work simplification principles.
7. A TREATMENT PROGRAM FOR PRE-SCHOOL AGE CEREBRAL PALSIES: CW; 20'; \$5; BB. Shows occupational therapy and physical therapy techniques in treating pre-school age cerebral palsied children.
8. A VISIT IN PICTURES TO THE CRIPPLED CHILDRENS SCHOOL, JAMESTOWN, N. D.: NSCCA; 30'; \$3; BB & M (silent, color). Shows medical and treatment program of the school, emphasizing occupational therapy, speech therapy, and physical therapy, as well as training offered in social adjustment and community relationships.
9. *ABILITY TO WORK: ZGA; —; Free; G (sound, 16 minutes). Shows how handicapped workers are put into right job.
10. ACTIVITY FOR SCHIZOPHRENIA: COFL; 20'; Free; O.
11. *ADVENTURE IN HEARING: SC; 92f; Free; —; FF (sound, 25 minutes). "Explains in clear simple fashion the entire process of hearing and its importance in everyday living (HWW)."
12. ADVERSIS MAJOR: ISWC; 10'; Free; P. "Shows training program of Queen Elizabeth's Training College for the Disabled in England (ISWC)."
13. AMPUTATION PROSTHESIS AND THEIR USE, PART II, LOWER EXTREMITY: PSAS; 39'; Free; AA.
14. AMPUTATIONS, PART III, UPPER EXTREMITY: PSAS; 15'; Free; AA (color). "Indicates suitable arm amputations at the site of election and also demonstrates the forearm cineplastic operation (PSAS)."
15. ANATOMY OF THE ARM, FOREARM AND THE HAND, THE: AMA; 56'; \$4; H (silent, color). Shows gross systematic dissection of the arm.
16. ARTERIAL DISORDERS IN THE UPPER EXTREMITY AND THEIR TREATMENT BY SYMPATHECTOMY: USA; 31'; Free; R (color).
17. ARTICULATORY MOVEMENTS IN THE PRODUCTION OF ENGLISH SPEECH SOUNDS: VA; 23'; Free; Q (color). Illustrates the production of speech through the use of animated drawings of breathing process, and direct photography of the movements of the laryngeal and articulatory structures.
18. BILATERAL ARM AMPUTEE: CW; 12'; \$5; AA (silent). Shows O.T. in training a double hand amputee and his return to 100% production in industry on a metal punch press.
19. CAMP TREETOP: ML; 17'; \$5; BB (color).
20. CAN WE AFFORD CRUTCHES: ISWC; 8'; Free; P. The work of orthopedists in clinics of cities and rural areas in South Africa shown. Emphasizes the importance of rehabilitation services.
21. CARDIAC PATIENT, THE: USOE; 33'; Free; F. Demonstrates nursing care given a cardiac patient, including comfort, rest, diet, feeding and cleanliness. Also illustrates occupational therapy activities.
22. CARE OF THE SICK AND INJURED—THE N.P. PATIENT: USA; 28'; Free; O.
23. CEREBRAL PALSY—METHODS OF AMBULATION: ISWC; 17'; Free; BB (color). "Portrays the training and treatment program at the Lenox Hill Pre-School C.P. Clinic in N. Y.; emphasizes techniques in walking for cerebral palsied pre-school children and equipment to be used (ISWC)."
24. CHALLENGE, THE: NH; 20'; Free; BB. Tells complete story of treatment offered to cerebral palsied patients at Newington Home.
25. CHILD AT PLAY, THE: CUEF; 18'; \$4; N. Depicts spontaneous activity of a 3 year old, as well as youngsters of various ages.
26. CHILDREN'S EMOTIONS: PCR; 22'; \$3; N. Discusses the major emotions of childhood: curiosity, fear, anger, jealousy and joy.
27. *CHILDREN'S EMOTIONS: MH; —; \$4; N (with captions).
28. CHOREA: NYFL; 16'; \$2; K (silent). "Gives brief outline of 3 groups of chronic degenerative chorea: Huntington, arteriosclerotic, and post-encephalitic (NYU)."
29. CITADEL OF HOPE: OH; 30'; —; MO & N (loaned only in California). Shows care and treatment of crippled children at Orthopedic Hospital.
30. CLINIC ON DEAFNESS: MFG; 33'; Free; FF (color). Demonstrates through animation the physiology of hearing, includes anatomy as well as pathological difficulties. Diagnostic methods to determine range of hearing and modern means of therapy are shown.
31. COMING HOME: NTA; 15'; Free; R. A dramatic treatment of personal and family problems faced by an average husband and father who finds that he has contracted T.B. The plot includes incidents during a portion of patient's stay at a tuberculosis hospital. Elements of rehabilitation, including occupational therapy, are included.
32. COMPLICATED AMPUTATIONS, CASE REPORTS, PARTS 1 and 2: PSAS; 52'; Free; AA. "Describes in detail techniques for triple amputations with hemiplegia, skull perforation, cranioplasty with tantalum plate (PSAS)."

33. **CONDITION IMPROVED:** NFB; 34'; —; L&O (sale \$90). Illustrates work of occupational therapists with war wounded, victims of industrial accidents, child patients, and psychoneurotic cases.

34. **CONVULSIVE AND ALLIED CONDITIONS:** NYFL; 18'; \$2; D (silent). Shows patients with acute epidemic encephalitis, cataplexy, narcolepsy associated with cataplexy, Jacksonian seizures due to cerebral neoplasm, convulsions of psychogenic origin, etc.

35. **CONVULSIVE SHOCK THERAPY IN AFFECTIVE PSYCHOSES:** PCR; 18'; \$2; O (silent). Demonstrates the behavior of four cases before and after treatment.

36. **COTTAGE SCHOOL:** CS; 15'; Free; BB (8mm, color, loaned only in California. A similar film, running 30' is available for professional showing only). Illustrates activities of classroom and physical training in special school for cerebral palsied children.

37. **CRIPPLED HEART, THE:** AHA; 15'; \$12.50; F (color, 33½ rpm, sound). "Case history of a ten year old boy with rheumatic fever; illustrates St. Louis Rheumatic Fever Program; drawings and clinical photographs of the heart (AHA)."

38. **CURARE IN SPASTIC PARALYSIS:** MB; 20'; Free; K.

39. **DEPRESSIVE STATES: 1:** PCR; 12'; \$1.75; O. "Shows middle aged patient suffering from recurrent depressions. Symptoms: motor agitation, depressed mood, feeling of hopelessness and sinfulness, and distinct fluctuation in mood during day (PCR)."

40. **DEPRESSIVE STATES: 2:** PCR; 11'; \$1.75; O. "Manifestations of retarded form of depression and of severe depression which has reached point of attempted suicide (PCR)."

41. **DIARY OF A SERGEANT:** COFL; 12'; Free; O. Shows how one soldier who lost his hands was able to regain his place in normal living.

42. **DYNAMIC PHYSICAL RECONDITIONING:** COFL; 12'; Free; L&P. Shows physical therapy, occupational therapy, various reconditioning methods including gymnasium work, games, swimming, etc.

43. **DYSTONIA MUSCULARUM DEFORMANS:** NYFL; 34'; \$3.50; K (silent). Shows patients in various stages of this disorder.

44. **EMOTIONAL HEALTH:** PCR; 20'; \$3; O. "Stresses frequency of emotional upset and urges treatment of prolonged disturbances (PCR)."

45. **EPIDEMIC ENCEPHALITIS:** NYFL; 31'; \$3.50; K (silent). Shows several different cases, giving sequential histories in most cases, over a period of several years of observation.

46. ***FINDING TUBERCULOSIS:** LL; —; —; R (free loan). A brief summary of the methods used in locating tuberculosis with a visual description of the Vollner Tuberculin patch test.

47. **FIRST AS A CHILD:** NAMH; 22'; \$5; M. Demonstrates the operation and benefits of a well-planned program for the care of crippled children in one community.

48. **FOLIE A DEUX:** PCR; 15'; \$2; O. "Symptoms in mother and daughter. Psychosis developed first in daughter then in mother, who had close emotional attachment to child (PCR)."

49. **FOR THOSE WHO ARE EXCEPTIONAL:** NSCCA; 45'; \$3.50; BB (color). The special educational facilities in many school districts of Illinois are described in this film.

50. **FRACTURES OF THE HUMERUS:** VA; 25'; Free; M (color). Anatomy of bones and muscles with their pulls which cause displacements are shown. The

anatomy, physiology, and the mechanics involved in the various fractures of the humerus depicted.

GALLEY FOURTEEN—OT—3314

51. **FRIEDERICH'S HEREDITARY ATAXIA AND LITTLE'S DISEASE:** NYFL; 16'; \$2; K (silent). Classical signs of hereditary ataxia shown. Various forms of dyskinesias of congenital origin in Little's disease depicted.

52. **FRUSTRATING FOURS AND FASCINATING FIVES:** MH; 22'; —; N (sale b&w \$95, color \$175). Traces behavior of Roddy at age 4 at home, through to kindergarten at age 5. Behavior takes form at home of childish helplessness to self-assertion, and at kindergarten from imaginative craftsmanship to inconsistent destructiveness.

53. **FUNCTION OF THE EAR IN HEALTH AND DISEASE:** MFG; 35'; Free; FF (color). Shows the physical action of the hearing mechanism in the ear. Recordings of the motion of the normal and diseased ossicles reacting to music and speech is vividly portrayed.

54. **FUNCTIONS OF THE NERVOUS SYSTEM:** PCR; 13'; \$1.75; K. Deals with gross anatomy and function of the nervous system.

55. **GOOD SPEECH FOR GARY:** MH; 22'; —; Q (Sale b&w \$90, color \$175). Shows how second grader Gary is aided in his speech problems through choral speaking, dramatic play, flannel board stories, games, interviews, pictures, puppets, radio broadcasting, and show and tell periods.

56. **HABIT TRAINING:** EH; 18'; Free; L (silent, color). Shows a total push program used with women patients.

57. **HALF A CHANCE:** COFL; 11'; Free; AA. Shows how an amputee with an artificial leg was able to participate in various sports, including professional basketball.

58. **HANDICAPPED GO CAMPING:** WSC; 10'; Free; N. Documentary record of an experiment in which handicapped and other children attend a summer camp together.

59. **HARD CORD, THE:** ISWC; 12'; Free; P. "Shows the program established in Europe by the International Refugee Organization for the rehabilitation and resettlement of physically displaced persons' (ISWC)."

60. **HARVEST OF GOODWILL:** GWI; 10'; Free; AA&P (color). "Shows how the Goodwill organizations help the physically handicapped to help themselves. An amputee truck driver overcomes his handicap and learns to support his family through a new trade which he mastered in a Goodwill shop."

61. **HE ACTS HIS AGE:** MH; 13'; —; N. (Sale b&w \$65, color \$120). Shows typical behavior of children at ages from 1 to 15 years.

62. ***HEART OF THE HOME:** AGA; 14f; \$19.50; F. (rental from AHA \$2.75).

63. **HEREDITARY ATAXIA:** USA; 33'; Free; K. (color).

64. **HOSPITAL TEAM:** AF; 27'; —; D. Gives dramatized account of the various jobs carried out in hospitals. A young girl after an accident discovers the work of a team of experts, radiographers, dieticians, therapists, almoners, etc., who work in the hospital.

65. ***HOW BIG A HANDICAP?** PAC; 45f; \$3.50; K (with script; sound edition \$10.50). Based on "Epilepsy—The Ghost is Out of the Closet," Public Affairs Pamphlet No. 98 by Herbert Yahraes.

66. **HUMAN RESOURCES:** SRC; 27'; Free; P (color). Demonstrates the work of the Seattle Rehabilitation Center, Department of Labor and Industry, State of Washington.

67. **INJURIES OF THE PERIPHERAL NERVES:** PFC; 30'; Free; K (color). Shows the parts of peripheral nerves, and types of injuries including ulnar, me-

dian, radial, sciatic, peroneal, tibial, and brachial plexus injuries. Surgical repair and regeneration also covered.

68. INSTITUTIONS: PCR; 21'; \$2.75; O. Survey of institutions among which are mental hospitals and institutions for feeble-minded.

69. INTRA ORAL AND PHARYNGEAL STRUCTURES AND THEIR MOVEMENTS: VA; 18'; Free; Q (color). Shows physiological activity of the tongue, soft palate and epiglottis.

70. INTRODUCTION TO PSYCHODRAMA: TFP; 25'; \$6; O. A didactic film demonstrating the function of a therapeutic theater and several psychodrama techniques.

71. *JIMMY BEATS RHEUMATIC FEVER: MI; 15F; —; E (free loan). The successful battle with rheumatic fever of an eight year old boy.

72. JOURNEY BACK: COFL; 20'; Free; L&P. Story of rehabilitation of hemiplegia, demonstrating work of physical therapist, occupational therapist, recreational therapist, speech therapist, social worker, etc., and role which each plays in recovery of patient.

73. JOURNEY TO REALITY: USA; 40'; Free; L&O. Occupational therapy for acute psychotic patients.

74. KESSLER INSTITUTE FOR REHABILITATION: ISWC; 16'; Free; P (color). Provides an overall view of integrated rehabilitation center, emphasizing the inter-relationships among medical specialties, nurses, therapists, vocational counselors, social workers, and limb and brace makers.

75. *KO TB: ZGA; 100f; —; R (15 minutes sound, loan \$5). Discusses T.B., how it spreads and how it can be checked.

76. LARGE MOTOR SKILLS FOR FOUR YEAR OLDS: UC; —; —; N. Individual sequences indicate the types and levels of large muscle motor skills that are characteristic of children this age.

77. LEARNING TO UNDERSTAND CHILDREN: PART I—A DIAGNOSTIC APPROACH: NYFL; —; \$5; N. Case study of an emotionally and socially maladjusted girl of fifteen. The observation of the child's behavior, her previous records, personal interviews, home visits, and an hypothesis for corrective measures are the diagnostic techniques shown.

78. LEARNING TO UNDERSTAND CHILDREN: PART II—A REMEDIAL PROGRAM: NYFL; —; \$5; N. Continuation of Part I. Shows how art is used for improving girls self confidence and interest in her school-work, and getting recognition and acceptance by fellow students.

79. LET THERE BE LIGHT: VA; 60'; Free; O. Methods of neuropsychiatric treatment in an Army hospital using narcosynthesis, hypnosis, and group psychotherapy.

80. LIFE BEGINS AT 85: BC; 45'; Free; BB (color, silent). Covers physical, occupational, and speech therapy, school and nursery training at workshop.

81. LIVING WITH LIMITATIONS: COFL; 20'; Free; P. Follows the course of three general medical and surgical patients throughout their hospitalization, showing how their physicians utilized the services of physical medicine and rehabilitation to attain objectives of returning patients quickly and economically to the community.

82. LONELY NIGHT, THE: NAMH; 65'; —; O. Feature film. Dramatizes modern psychiatric treatment and prevailing concepts of mental preventive health.

83. MANIC STATE: PCR; 15'; \$2; O. "Elderly female exhibits typical hypomanic symptoms during interview (PCR)."

84. MEET MCGONECAL: USA; 12'; Free; AA. Orthopedic rehabilitation of amputee.

85. MENTAL HOSPITAL: NAMH; 20'; \$5; O. Documents the day to day story of a mental patient from admission to discharge.

86. MIRACLE ON SKIS: ISWC; 16'; Free; AA. "The film shows how two skiers overcame physical disabilities and continued to ski expertly. Both are amputees, one with a double below-knee amputation, and the other with a single above-knee amputation (ISWC)."

87. MODERN MIRACLE: ISWC; 8'; Free; N&P. The rehabilitation of a crippled boy showing facilities available in New South Wales, Australia, for assistance to crippled children.

88. MOVEMENTS OF THE TONGUE IN SPEECH: IFB; 20'; \$5; Q. Movements during speech of the tongue and lips with a patient who as a result of surgery had a part of cheek removed.

89. MY CHILD IS BLIND: UW; 21'; —; A. Shows how a blind child given patient treatment and proper training at a special nursery school for blind children, can be taught to do many things normal children do.

90. NATION'S MENTAL HEALTH, THE: NAMH; 18'; \$5; O. "States the basic problems of mental illness and takes a quick look at some of the things that are being done to promote mental health (NAMH)."

91. NEW HORIZONS: ISWC; 22'; Free; N&P (color). "Shows program of the Saskatchewan Council for Crippled Children, including auxiliary services. Emphasis is on community participation and support in the development of an effective voluntary rehabilitation service (ISWC)."

92. NURSE'S DAY WITH THE MENTALLY ILL: PCR; 28'; \$2.50; O (silent). Shows some of the duties and techniques of psychiatric nursing, including nurse's part in management of meals, in shock therapy, hydrotherapy, seclusion care, and in occupational therapy.

93. OCCUPATIONAL HEALTH PROBLEMS: MFG; 48'; \$25; P (color). The film deals with industrial dermatoses, lead contamination, tuberculosis surveys, the common cold in industry, traumatic cases, and burns, and the basic principles of rehabilitation of the injured, as well as atomic radiation control and handling.

94. O.T. IN TREATMENT OF ARTHRITIS: MC; —; Free; L (silent, color, in revision, available middle 1954). Shows exercise in OT clinic with suggested substitutes to be used at home after dismissal from hospital.

95. *OT INFORMATION PLEASE: AOTA; —; \$1; L (15 minutes, script and cue sheet, also free loan). Shows occupational therapy training from admission to graduation.

96. *OCCUPATIONAL THERAPY UNLIMITED: AOTA; —; \$1; L (20 minutes, script and cue sheet, also free loan). Presents a general picture of OT in various disability areas.

97. ORGANIC REACTION-TYPE: SENILE: PCR; 10'; \$1.75; O. "Interview between psychiatrist and man and woman suffering from senile psychoses. Impairment of intellectual functions evidenced (PCR)."

98. ORTHOPEDIC ROOM AT HAVEN SCHOOL: NSA; 15'; Free; M (color).

99. OUT OF THE SHADOWS: SCF; —; —; BB. "Activities in the Foundation Training Center including OT, PT, ST, and academic work for pre-school up to the 8th grade (HWW)."

100. OVERCOMING DIFFICULTIES: ISWC; 50'; Free; P. Depicts the program of the Society and Home for Cripples in Denmark. Complete medical, social, and vocational services for children and adults are shown.

101. PARANOID CONDITIONS: PCR; 13'; \$2; O. "First patient, acute paranoid, exhibits delusional system involving government and religion. Second patient,

chronic paranoid, shows persecutory delusions (PCR)."

102. PEEKING IN ON A CEREBRAL PALSY NURSERY SCHOOL: SPR; 15-20'; \$50; BB (color). Illustrates activities of a therapeutic nursery school.

103. PIONEERING FOR AMERICA'S CHILDREN: IP; 40'; Free; BB (color). Depicts various types of treatment of children brought to the CP Clinic at Buffalo Children's Hospital.

104. PLAY DAYS: EH; 25'; Free; 0 (silent, five different films). Shows competitive sports and festival days at St. Elizabeth's Hospital.

105. PREFACE TO A LIFE: PCR; 28'; \$3.50; N. Promotes basic idea that children must be understood and respected as individuals.

106. PREFRONTAL LOBOTOMY IN CHRONIC SCHIZOPHRENIA: PCR; 21'; \$2.25; O. Behavior of four patients before and after lobotomy shown.

107. PREFRONTAL LOBOTOMY IN THE TREATMENT OF MENTAL DISORDERS: PCR; 13'; \$2.25; D&O. Shows location of incisions and structure encountered on skull and brain specimens in performing prefrontal lobotomy. Operation then shown in full detail.

108. PRINCIPLES OF DEVELOPMENT: PCR; 17'; \$3; N. "Fundamentals of growth and change; six basic principles; variables that create individuality; balance of factors for good development (PCR)."

109. PRINCIPLES OF REDUCTION: VA; 30'; Free; M (color). Application of the fundamentals of the reduction of fractures by traction, counter-traction, and suspension, and an understanding of the anatomy of the various fractures of the long bones.

110. PROBLEMS IN MOTION: USA; —; Free; L. Occupational therapy in treatment of physical disabilities.

111. PROGRESSIVE HEPATO-LENTICULAR DEGENERATION: NYFL; 14'; \$2; K (silent). Demonstrates patients with the various neurological entities involving the extra-pyramidal system and liver pathology.

112. PROGRESSIVE MUSCULAR ATROPHIES, DYSTROPHIES, AND ALLIED CONDITIONS: NYFL; 27'; \$3.50; K (silent). Illustrative cases of each are given.

113. PSYCHOLOGICAL IMPLICATIONS OF BEHAVIOR DURING THE CLINICAL VISIT: NYFL; 20'; \$3; N (silent). Shows contrasting behavior of several children while awaiting examination during physical and dental examinations, IQ tests, and at play.

114. PSYCHONEUROSIS: NYFL; 23'; \$3.50; O. Patients presenting signs and symptoms suggestive of both psychogenic and organic etiology shown, with differential diagnosis considered.

115. REAL MISS AMERICA, THE: USDD; —; Free; L. Publicity film for recruitment purposes for occupational therapists, nurses, physical therapists, dieticians.

116. RECREATIONAL ACTIVITIES AT SHEPARD AND ENOCH PRATT: SEP; 22'; Free; O (silent).

117. RECREATIONAL AND OCCUPATIONAL THERAPY: COFL; 13'; Free; L. Shows recreational and occupational therapy activities fitted to the patient's condition; passive diversion during an immobile stage following traumatic injury; limited physical activities carried on in bed; individualized occupational therapy supervised by the nurse; group and social recreation projects.

118. RE-EDUCATION OF A BILATERAL BELOW ELBOW AMPUTEE: LM; 30'; Free; AA (color, silent).

119. REFLEX ACTION: CUEF; 15'; \$3; K (silent). Shows structure of the neuron, path of an impulse and definition of a reflex act.

120. REHABILITATION OF CEREBRAL PALSID

CHILDREN: NSCCA; 35'; \$3; BB (silent, color). Shows treatment program for CP children at St. John's Crippled Children's School and Hospital, Springfield, Ill. Illustrates integration of special education and recreation in medical care program.

121. REHABILITATION IN INDUSTRY: BIS; —; —; P. Covers the special provision made for injured and disabled workers at Vauxhall Motors plant. Jobs and tools are suited to individual needs. Close medical supervision, physiotherapy, and normal pay and hours contribute to speedy recovery.

122. REHABILITATION, INCORPORATED: USDL; 26'; Free; P (color). Shows the Vancouver Rehabilitation Centre of the British Columbia Workmen's Compensation Board.

123. REHABILITATION OF CHRONIC NEUROLOGICAL CASES: COFL; 20'; Free; K&P.

124. *REHABILITATION OF HEMIPLEGIC: FI; —; \$3; P. Gives causes of hemiplegia and procedure for rehabilitation.

125. REHABILITATION OF INJURED WORKMEN: SIF; 15'; Free; P (also 35mm). Depicts work of the State Insurance Fund Rehabilitation Center of Puerto Rico, showing OT and PT.

126. REPORT ON DONALD: NSCCA; 20'; \$3; Q. Tells the story of a college freshman who is a severe stutterer, treated at the Speech and Hearing Clinic, U. of Minnesota.

127. RETIRE TO LIFE: NAMH; 20'; \$5; E. "A film dealing with the mental health of older people, specifically those facing the problem of retirement from business when still mentally and physically able (NAMH)."

128. RETURN TO LIFE: ISWC; 10'; Free; R. "Portrays work for the tubercular by the Finnish Disabled Ex-Servicemen's Association by following one man's progress through rehabilitation. Shows the combination of rest, recreation, and vocational rehabilitation (ISWC)."

129. RHEUMATOID ARTHRITIS OF THE SPINE: USA; 34'; Free; D.

130. ROAD TO RECOVERY: COFL; 40'; Free; AA, F, O, & P. Shows rehabilitation programs for amputees, neuropsychiatric, and cardiac patients.

131. RODNEY: NTA; 10'; Free; R (color, also available 35 mm). A light-hearted treatment in color-animation of the serious problem of finding and curing tuberculosis. The plot follows the central character, Rodney, through a series of incidents related to the discovery and treatment of a case of early TB. Animated graphs show how T.B. is spread and how surgical treatment can help arrest it.

132. ROUND TRIP: AHA; 14½'; \$2.50; F. Shows how various community agencies help a child recover from rheumatic fever.

133. Rx ATTITUDE: VA; 18'; Free; O (color). Shows representative interchanges between personnel and patients and how they can be used as a positive therapeutic force to mental patients.

134. SCHOOL OF ANOTHER CHANCE, THE: ICD; 20'; Free; P (replaced in 1954 by a new film). Covers guidance, education, recreation, vocational training, sheltered employment.

135. SCHIZOPHRENIA: CATATONIC TYPE: MH; 12'; —; O (sale \$35). Psychiatrist describes mental disorder followed by interview with patient showing typical symptoms.

136. SCHIZOPHRENIA: HEBEPHRENIC TYPE: MH; 13'; —; O (sale \$50). Psychiatrist describes mental disorder followed by interview with patient showing typical symptoms.

137. SCHIZOPHRENIA: SIMPLE-TYPE DETERIORATED: MH; 11'; —; O (sale \$35). Psychiatrist

describes mental disorder, followed by interview with patient showing typical symptoms.

138. **SEARCH: NSCCA**; 26'; \$3.50; BB. Depicts attitudes of friends, relatives, and strangers toward a CP person, as well as CP's own attitude. Aimed primarily at lay public to gain their understanding of CP.

139. **SKY IS THE LIMIT, THE: COFL**; 20'; Free; AA&P (color). Illustrates phases of rehabilitation that apply to above-knee amputee, walking technique for individuals with two normal lower extremities and for a unilateral above-knee amputee.

140. **SOCIAL DEVELOPMENT: NYFL**; —; \$5; N. Shows an analysis of social behavior at different age levels and reasons underlying the changes in behavior patterns as the child develops.

141. **SOMATIC ENDOCRINE TYPES: NYFL**; 26'; \$3.50; D. Various disorders in this group shown.

142. **SOME ASPECTS OF PHYSICAL REHABILITATION IN JAPAN: ISWC**; 20'; Free; AA&P. "Portrays the work of the Osaka Rehabilitation Center in Japan. Graphs and charts are used to show motion studies in activities of daily living of woman double arm amputee (ISWC)."

143. **SPASTIC PARALYSIS—SURGICAL TREATMENT: DL**; 35'; Free; D (silent).

144. ***SPONTANEOUS PAINTING AND DRAWINGS BY PSYCHIATRIC PATIENTS: USA**; 58f; Free; O.

145. **SPRING FESTIVAL: EH**; 25'; Free; O (five different films, silent). Each film shows different spring festivals of patients at St. Elizabeth's hospital.

146. **SURGICAL APPROACHES TO THE BONES OF THE WRIST: VA**; 34'; Free; D (color). "Animated diagrams show the anatomy of the volar, dorsal, and ulnar aspects of the wrist. Operations employing approaches to the volar, radiovolar, ulnar and dorsal aspects are shown. Each is recapitulated in animation (VA)."

147. **SURGICAL APPROACHES TO THE ELBOW JOINT: VA**; 30'; Free; D (color). Shown in animated drawings and actual scenes recapitulated in animation.

148. **SURGICAL APPROACHES TO THE SCAPULO-HUMERAL JOINT: VA**; 30'; Free; D (color). Animated diagrams depict the bones, ligaments, muscles, tendons, and neurovascular structures with which the surgeon must deal in various approaches to the shoulder joint. Followed by actual surgical operations.

149. **SURGICAL APPROACHES TO THE STERNO-CLAVICULAR AND ACROMIOCLAVICULAR JOINTS: VA**; 17'; Free; D (color). "Animated diagrams show the anatomy of the anterior aspect of the two joints. An operation approaching each joint is shown. Each is recapitulated in animation (VA)."

150. ***T.B.: WHAT IT IS AND WHAT TO DO ABOUT IT: NTA**; 20f; —; R (color, free loan). A presentation in drawings and graphs illustrating the basic facts about tuberculosis.

151. ***TEAMWORK: NTA**; 30f; —; R (free loan, color). "Portrays cooperation among hospital staffs and official and voluntary health organizations in the physical, mental, and social rehabilitation of the T.B. patient (HWW)."

152. **TERRIBLE TWOS AND TRUSTING THREES: NAMH**; 22'; \$6; N. A study of child behavior at two and three years.

153. **THAT THE DEAF MAY SPEAK: IP**; 42'; FF (color). Depicts problems faced by the deaf.

154. **THERAPEUTIC EXERCISE—PERIPHERAL NERVE INJURIES: VA**; 17'; Free; C&K.

155. **THERAPEUTIC EXERCISE—TENDON TRANSPLANTS: VA**; 17'; Free; C&D.

156. **THERE'S A WAY: BIS**; —; —; P. Deals with

the problems of establishing a rehabilitation department in a general hospital.

157. **THEY DO COME BACK: NTA**; 20'; Free; P&R (also available 35 mm). A dramatic treatment of problems connected with the cure of tuberculosis and rehabilitation of patients. The story deals with a young man and his fiancée, both of whom contract tuberculosis. Their course of hospitalization, rehabilitation and return to useful living are illustrated.

158. **THIS IS TB: NTA**; 10'; Free; R (also available 35 mm). A documentary treatment of problems connected with the discovery, spread and treatment of tuberculosis.

159. **TIME AND MOTION STUDY: PCR**; 11'; \$1.50; G (silent). "Photographic record of inefficient and efficient assembly procedure. Shows application of time and motion principles (PCR)."

160. **TIME OUT: USA**; 26'; Free; L&R. Occupational therapy in treatment program for tuberculosis patients.

161. **THORACIC SURGERY—THORACOPLASTY—1st STAGE AND 2nd STAGE IN TREATMENT OF PULMONARY T.B.: USA**; 23'; Free; D&R (color).

162. **THORACIC SURGERY—LOBECTOMY RIGHT UPPER AND MIDDLE LOBES IN THE TREATMENT OF PULMONARY T.B.: USA**; 22'; Free; D&R (color).

163. **TOWARD INDEPENDENCE: COFL**; 30'; Free; P. Illustrates rehabilitation of paraplegic patients.

164. ***TRAINING EXPERIENCES IN OT: USC**; 32f; \$9; L.

165. **TRAINING OF THE DISABLED: AMA**; 24'; \$2; AA; FF, & P. Shows training of disabled British veterans with ear and eye defects, and those with loss of one or both extremities.

166. **TRANSORBITAL LOBOTOMY: PCR**; 12'; \$2.75; O (also available color \$4). Brief history of operation, surgical procedures in cadavar, and gross anatomical methods of transorbital lobotomy in cadavar and clinical brain.

167. **TRANSORBITAL LOBOTOMY: PART 2. CLINICAL STUDY OF A CATATONIC: PCR**; 9'; \$2; O (color rental \$3.25). Follows 19 year old male catatonic before and after treatment by transorbital lobotomy and insulin shock.

168. **TREATMENT OF MENTAL DISORDERS: PCR**; 20'; —; P. Demonstrates case interviewing and procedures of physical examination at admission, methods of forced feeding, methods of quieting excited patients, uses of heat therapy on schizophrenics and other types, fever therapy, occupational and recreation management in psychopathic hospitals.

169. **UNDERSTANDING CHILDREN'S DRAWINGS: NYFL**; —; \$2.50; N. Describes and interprets the drawings of children from three to five years of age.

170. **UPPER EXTREMITY PROSTHETICS: VA**; —; Free; AA (color). Prescription, fabrication, fitting, harnessing and criteria for acceptance shown. Pre-prosthetic and prosthetic training activities depicted. Modern devices and appliances described.

171. **VOCATIONAL TRAINING FOR THE HANDICAPPED: DE**; 15-18'; Free; B&G (color). On counseling training and placing physically handicapped persons.

172. **VOYAGE TO RECOVERY: COFL**; 30'; Free; L&P. Shows how physical therapy, occupational therapy, outside detail, and liberty are fitted into the patients' rehabilitation program.

173. **WARD CARE OF PSYCHOTIC PATIENTS: USA**; 44'; Free; O.

174. **WE SPEAK AGAIN—THE REHABILITATION OF THE LARYNGECTOMIZED PATIENT:**

MH; 16'; \$7.50; P&Q (color). A demonstration of the basic methods of teaching the use of esophageal voice.

175. **WITHIN YOUR REACH:** NYS; —; —; AAA. "Shows how to simplify the kitchen storage of utensils and supplies to eliminate needless lifting, reach, stooping and walking (HWW)."

176. **WONDER ENGINE OF THE BODY:** AHA; 11'; \$2.50; F. Animated diagrams illustrate lecture on heart and heart diseases.

177. **WORKING AND PLAYING TO HEALTH:** NAMH; 35'; \$7.50; O. Depicts recreational, occupational and industrial therapies in mental hospital.

178. **WORKING WITH YOUR HEART:** AHA; 19'; \$3.25; F. "Documentary case-history showing the activities and functions of the Work Classification Clinic of the Cleveland Heart Association (AHA)."

179. **YOU CAN HEAR AGAIN:** COFL; —; Free; FF.

180. **YOU CAN LICK TB:** COFL; 20'; Free; R.

181. **YOUR CHILDREN AND YOU:** NAMH; 31'; \$5; N. "A realistic approach to the care of young children up to the age of four or five, with hints on training, both physical and psychological (NAMH)."

182. **YOUR CHILDREN'S PLAY:** MH; 20'; —; N (sale \$85). "Illustrations show how children learn by playing, how they acquire knowledge, physical dexterity, and an understanding of the world about them, and how play activities channel their emotional states (MH)."

PART II

183. **A BABY'S DAY AT FORTY-EIGHT WEEKS:** CUEF; 11'; \$3; N. Everyday experiences and their significance in the child's development.

184. **A CHANCE TO PLAY:** GE; 20'; Free; E. Deals with the problem of the lack of community recreation for young and old and methods of solving these problems.

185. **A MULTIPLE PERSONALITY:** MFG; 20'; \$10; O (color). Shows the normally hidden interactions and operation of conscious and unconscious mental mechanisms in a hypnotized patient.

186. **A TWO-YEAR OLD GOES TO HOSPITAL:** NYFL; —; \$6; N. The film describes the behavior of a child, two years and five months old, during eight days in a hospital ward.

187. **ADVENTURE IN MATURITY:** IFB; 22'; \$10; E. "A woman who has resigned herself to a rocking-chair existence is stimulated by an older woman friend to learn about opportunities for older women in the community."

188. **AMERICA'S UNTAPPED ASSET:** NSCCA; 13½'; Free; P. Shows disabled workers on the job at the Bankers Life and Casualty Company of Chicago.

189. **ARTERIAL INSUFFICIENCY OF THE EXTREMITIES—PHYSIOLOGY, DIAGNOSIS AND TREATMENT:** MFG; 21'; \$10; F (color). Peripheral vascular conditions such as Buerger's and Raynaud's disease and gangrene of the limbs are shown.

190. **ARTERIOSCLEROSIS:** AHA; 3'; Free; F. The importance of research in the fight against coronary artery disease.

191. **AS OTHERS SEE US:** PCW; 15'; —; D. Portrays good and poor relationships of hospital personnel with the patient during admission and in providing for his comfort and care.

192. **BACK TO LIFE:** DW; —; —; O & P (color). Shows the hospitalization, treatment, and rehabilitation of a paranoid patient.

193. **BEGINNING OF PICTURE MAKING:** IFB; 6'; \$3; N (color). Shows many examples of work produced by children, chiefly with tempera paint, at the ages of three through seven.

194. **BEHAVIOR PATTERNS AT ONE YEAR:**

CUEF; 10'; \$3; N. Normal behavior patterns for the one-year old. Tests demonstrate child's coordination and reactions.

195. **BLOSSOMS REVIVED:** ISWC; 11'; Free; K & P. Shows the importance of early diagnosis of poliomyelitis and of proper treatment. Successful rehabilitation demonstrates the value of adequate services and emphasizes the need for them.

196. ***BODY MECHANICS AND THE PATIENT:** JONAS; 45f; —; H (also in color). Illustrates the application of good body mechanics for patients in various clinical areas, such as pediatrics, medicine, surgery, obstetrics, and orthopedics.

197. **BORN IN THE WHITE HOUSE:** NFIP; 26'; Free; K. Documentary tracing development of medical science and recent gains in polio research.

198. **COMMUNICABLE DISEASES:** CL; 35'; Free; D (color). Discusses measles, rubella, scarlet fever, chicken pox, small pox, epidemic cerebrospinal meningitis, murine typhus, poliomyelitis, infectious mononucleosis, tetanus, pertussis, and diphtheria. It includes differential symptomatic characteristics, illustrated by actual patients, as well as measures for prevention and cure.

199. **COURAGE TRIUMPHS:** ISWC; 15'; Free; K & L & P. Shows the program at the Gonzales Warm Springs Foundation, Texas, for children stricken with poliomyelitis, including OT, PT, and a full school program.

200. **DELUSIONS AND HALLUCINATIONS IN A SENILE SETTING:** PCR; 5'; \$2; E & O. Shows a 79 years old male patient with advance arteriosclerosis and auricular fibrillation who tries to demonstrate newly acquired powers of communication, both sending and receiving.

201. **EARLY SOCIAL BEHAVIOR:** CUEF; 11'; \$3; N. Various children observed and differences in their social behavior examined and discussed.

202. **EMOTIONAL MATURITY:** MH; —; —; O. Surveys the strong emotions and demonstrates their effects in terms of behavior.

203. **EVERYBODY'S HANDICAPPED:** ISWC; 18'; Free; B & P. Shows the importance of skilled counselling and placement in securing suitable employment for handicapped. Emphasizes the need for education of placement personnel, employers, and the public.

204. **FACING REALITY:** MH; —; —; O. Explains what defense mechanisms are and how and why people use them, pointing out their failure as a means of adjusting to real life situations.

205. **FINGER PAINTING:** NYFL; —; \$6; O (silent, color). Demonstrates the process of finger painting and the response of nine children from three to six years of age in using the paints.

206. **FINGER PAINTING AS A PROJECTIVE TECHNIQUE:** PCR; 21'; \$6.50; O (color). Repeated demonstration and discussion of way in which patient should be shown how to fingerprint. Finger painting technique by an expert demonstration. Productions of patients with known diagnosis shown.

207. **GOODBYE, MR. GERM:** NTA; 14'; Free; R. The basic facts about tuberculosis presented through animated cartoons.

208. **HEALTH:** BIS; 9'; \$1.50; AA. One portion of this film deals with the making, fitting, and manipulation or artificial limbs.

209. **HEREDITY AND FAMILY ENVIRONMENT:** MH; —; —; O. Points out that while the physical, emotional and mental makeup, and personality are largely inherited, environment develops or inhibits these tendencies.

210. **HOW TO AVOID MUSCLE STRAINS:** BS; 15'; —; H. Presents the application of principles of levers to body mechanics.

211. IN DAILY BATTLE: NFIP; 26'; Free; K. How a National Foundation of Infantile Paralysis chapter aids polio patients and utilizes community facilities.

212. IN EVERY DAY: CUEF; 10'; \$2.50; N. Demonstration of good health habits for the young, for physical and mental fitness.

213. INSIDE STORY, THE: NTA; 15'; Free; R (color). The scientist-physician, using visual aids, explains the nature of the tubercle bacillus, spread of TB, bodily defenses against TB, treatment of TB, and problems in TB control.

214. INTRODUCTION TO OCCUPATIONAL THERAPY: USA; 21'; Free; L, M, O & R. An overall introduction to the physical, psychiatric, and tuberculosis areas of the occupational therapy profession. Adapted from films "Problems in Motion," "Journey to Reality," and "Time Out."

215. INVESTMENT IN HUMAN WELFARE: ISWC; 21'; Free; P (color). Shows how the physically handicapped are being successfully employed as a result of planned and coordinated program.

216. ISOLATION TECHNIQUE: UWF; 20'; —; R. Shows how infection may be spread; describes the setting up of an isolation unit, the using of an isolation gown, the scrubbing of hands, the care of an isolated patient, and terminal disinfection.

217. *LONG ADVENTURE, THE: NTA; 30f; —; R (free loan, color). Reviews highlights in the history of TB control.

218. LONG CANE, THE, PART I: INDOORS: UWF; 32'; —; A. The problems of the sightless discussed. Demonstrates therapeutic methods in general and specific techniques of foot travel, including use of a cane, physical retraining for mobility within the hospital, and preparation for advanced therapy.

219. LONG CANE, THE, PART II: OUTDOORS: UWF; 32'; —; A. Shows therapy for the sightless in techniques of foot travel outside the hospital in controlled areas, both residential and business, including uses of the cane, sound detection and problems related to public attitudes.

220. MANAGEMENT OF THE FAILING HEART: MFG; 35'; Free; F (color). Impairment of heart function due to auricular fibrillation, constrictive pericarditis and pericardial effusion and effects on the respiratory system are shown. The management of the patient in heart failure covers the value of properly instituted bed rest, as well as the use of drug therapies.

221. MEANING OF ADOLESCENCE: NYFL; —; \$5; N. This film describes the uncertain status of the adolescent and provides an overview of the social, emotional, mental, and physical changes occurring in the years between childhood and adulthood.

222. MEET ME I-DA: ISWC; 20'; Free; AA & P (color). Shows the services at the Kessler Institute for Rehabilitation for a little Hawaiian girl born without arms. Includes training, fitting and application of prosthesis, counseling of parents.

223. MODERN MEDICINE LOOKS AT THE HEART: AHA; 30'; Free; F. Heart examination and surgery.

224. MODERN SURGERY: CUEF; 18'; \$4; D. The work and organization of a modern hospital and its varied medical personnel.

225. MOTION STUDY PRINCIPLES: PCR; 27'; \$3.25. Important principles of motion economy; how applied to specific operation.

226. MULTIPLE SCLEROSIS: ISWC; 8'; Free; K. Shows symptoms and treatment of multiple sclerosis.

227. MUSCLE STATUS: CUEF; 35'; \$6; H (silent).

"Depicts the examination of changes in muscle status by investigation of volume and contour, active mobility and strength of the different muscles and muscle groups, resistance to passive movements and electrical excitability. The modern aspect of the chemical transmission of nerve impulses is explained in animations."

228. MUSCULAR SYSTEM: PCR; 11'; \$1.75; H. Function and structure in human body. Animation and x-ray photography illustrate muscle action.

229. NP PATIENT, THE: UWF; 28'; —; O. Illustrates how to care for and handle neuropsychiatric patients; typical cases and their treatment.

230. NURSE'S DAY WITH THE MENTALLY ILL: PCR; 22'; \$3.75; O (new version, also available in color at \$6.50 rental). Shows typical activities of a student nurse in a modern psychiatric hospital. Included in film are nurse's role in shock therapy and lobotomy program. The film includes many spontaneous examples of the behavior of the mentally ill.

231. OPPORTUNITIES UNLIMITED: ISWC; 15'; Free; G. Illustrates successful employment of handicapped workers with emphasis on the importance of understanding by employers.

232. OUT OF THE NIGHT: BIS; 10'; \$1.50; A. Training of blind people in Britain for interesting and useful careers, and training of blind children in special schools.

233. PHYSICAL ASPECTS OF PUBERTY: NYFL; —; \$5; N. Emphasizes the physiological aspects of puberty. The film also shows how variations in development can have social repercussions.

234. PHYSICAL MEDICINE IN THE HOME TREATMENT OF ARTHRITIS: GHM; 50'; —; D & P (color, silent). The patient is instructed in the importance of determining a proper balance between rest and exercise as it applies to his individual problem.

235. PLAY IS OUR BUSINESS: NYFL; —; \$5; N. A variety of activities is shown with the emphasis on the theme that, for children, work is play and play is work and both are integral parts of the learning process.

236. PLAYTIME: CUEF; 8'; \$3; N. Importance of play in the physical and mental development of children.

237. *POSTURE IN REST AND ACTIVITY: JONAS; 40f; —; H (also available in color). Illustrates body mechanics in everyday activities and rest.

238. PROBLEMS OF RHEUMATOID ARTHRITIS: ARF; 14'; Free; D (color, new version). Outlines the presently accepted therapies of proven value which cover supportive measures, use of physical medicine, x-ray therapy in spondylitis and the recommended drugs.

239. PROBLEMS IN THE TREATMENT OF POLIOMYELITIS: UM; 35'; \$5; K (color). Demonstrates the many problems in the treatment of polio, and demonstrates several methods of therapy used with patients.

240. RECONDITIONING CONVALESCENTS FOR RETURN TO DUTY: UWF; 37'; —; P. Portrays the medical facilities of the Army for restoring the physical and mental well being of wounded soldiers.

241. REFLEXES: CUEF; 35'; \$6; H & K (silent). Illustrates the reflex arc through animation; differentiates proprioceptive and exteroceptive reflexes, and describes the various end organs. Demonstrates the following clinical examinations: tendon reflexes, disturbances of tendon reflexes, superficial reflexes of skin and mucous membranes, and abnormal reflexes.

242. REHABILITATION OF A PIANIST: ISWC; 10'; Free; AA & P (color). Shows the services at the Kessler Institute for Rehabilitation for a pianist who lost both hands. Following medical care, fitting, and training with prosthesis and practice he is again able to play the piano.

243. **REHABILITATION STORY, THE:** ISWC; 30'; Free; G & P. A survey film showing the work of the Virginia State Vocational Rehabilitation Service, the effects of disabilities on the individual, and how treatment, vocational training, and job placement are effectively used to get them back to work again. The Woodrow Wilson Rehabilitation Center is featured in the film.

244. **RESISTIVE EXERCISES IN PHYSICAL THERAPY FOR THORACOPLASTY:** UWF; 26'; —; C & H (color). Explains how the skeletal structure and muscle balance are affected by thoracic surgery; the deformities often resulting from thoracic surgery; and how such deformities can be minimized or corrected by correct posture, over-correction, and resistive exercises.

245. **RHEUMATOID DISORDERS—PHARMACOLOGY AND CLINICAL EVALUATION OF A MODERN THERAPEUTIC AGENT:** MFG; 33'; Free; D (color). The pathology of the major rheumatic entities such as rheumatoid arthritis, osteo-arthritis, rheumatoid spondylitis, gout, bursitis and certain degenerative diseases are pictorially depicted and the clinical use of phenylbutazone is discussed.

246. **ROLE PLAYING IN HUMAN RELATIONS TRAINING:** CUEF; 30'; \$6; O. Produced at the Bethel, Maine Conference on Group Dynamics, this film illustrates a number of role playing situations.

247. **SAFE TUBERCULOSIS NURSING:** UWF; 21'; —; R. Emphasizes the importance of asepsis in the nursing care of tuberculosis patients, and shows preventive measures to be used by nurses and hospital personnel.

248. **SHYNESS:** CUEF; 23'; \$5; N. Demonstrates how shyness is fostered in children, and its effects in adult life. Film reveals how confidence-destroying demands of parents predispose children to shyness, and how children can be guided to make better social adjustments.

249. **STUDY IN HUMAN DEVELOPMENT: PART 3, NINETEEN MONTHS TO TWO YEARS AND EIGHT MONTHS:** PCR; 19'; \$2; N (silent). Emphasizes gross and fine motor development and beginnings of cooperative play. Stages shown are 19, 24, and 32 months.

250. **STUDY IN HUMAN DEVELOPMENT: PART 4, THREE YEARS TO FIVE YEARS:** PCR; 18'; \$2; N (silent). Shows socially interdependent play and development of skill in drawing at three years and typical motor-coordination is demonstrated. During fourth year finer coordination, greater ability in drawing and rudimentary musical skills demonstrated. Fifth year shows child beginning characteristic social play activities.

251. **SURGERY IN CHEST DISEASES:** AMA; 45'; \$3; D.

252. **SYMBOLS OF EXPRESSION:** PCR; 26'; \$2.50; O (silent). Attempts to demonstrate that an individual's drawings, doodlings, art productions, dance forms, signatures, or written productions embody "key symbol" of personality. Demonstrations with children and college students.

253. **THREE TO MAKE READY:** ICD; 44'; Free; P (color). A dramatic portrayal of the rehabilitation of a handicapped man, woman and child . . . an industrial accident case, a brain damage (cerebral palsy) case, and a youngster suffering from paralysis. Shows the comprehensive facilities of the Institute for the Crippled and Disabled, a modern total rehabilitation center, at work.

254. **TRAINING OF THE BILATERAL ARM AMPUTEE:** KI; \$5; AA & L (color). Shows procedures for the training of a bilateral arm amputee with prosthesis, emphasizing occupational therapy.

255. **TRIUMPH OF THE WILL:** ISWC; 20'; Free; AA & P (silent). Shows the successful return to professional life of a man who has lost both legs and parts of

both hands. Emphasizes the role of individual attitude in re-adaptation to life.

256. ***TB—EVERYBODY'S PROBLEM:** NTA; 48f; —; R (free, loan, color). A pictorial explanation of the basic facts about tuberculosis.

257. **TWO LIVES:** NTA; 20'; Free; R. The life of a successful man who built a productive career after relapse and final recovery from TB. Shows that TB patients should stay in the hospital until cured and afterward adopt a way of life which helps to keep them healthy.

258. **UNCONSCIOUS MOTIVATION:** NYFL; —; \$7.50; O. Demonstrates how everyday thoughts, feelings, and actions may be influenced by unconscious motives.

259. **UNSUSPECTED:** NTA; 16'; Free; R. A story of a TB patient and her family. Information about case finding and treatment is given.

260. **UPPER EXTREMITY, THE:** UWF; 15'; —; AA & D (color). Shows operation on the supracondylar area of the arm, revision and reamputation of the stump, and the technique of cineplastic operation. Illustrates types of prosthesis for upper extremity amputations.

261. **WARD HOME:** MBS; 5'; Free; P. Tells the story of the Home Care Service given by the New York City Department of Hospitals.

262. **WHAT'S ON YOUR MIND:** CUEF; 10'; \$3; O. Modern psychiatry and clinical psychology, and examples of the adjustments demanded by modern life.

263. **WOUNDS OF THE HAND:** UWF; 14'; —; D & H. Shows the parts and structure of the hand. Explains the desirability of primary closure of wounds in combat areas reserving elective surgery and plastic surgery for special hospitals in the U. S.

264. **YOU'LL NEVER WALK ALONE:** NSCCA; 27'; \$3.50; BB. Shows the various types of direct services available before and during the time the handicapped child is at a summer camp for crippled children.

PART III

Craft Area

1. ***AMERICAN BRAIDING CRAFT:** CB; 46f; \$3 (with captions).
2. **ART OF SPINNING AND WEAVING:** IFB; 30'; \$2.50 (silent).
3. **BLOCK CUTTING AND PRINTING:** CUEF; 13'; \$6.
4. **ETCHERS ART, THE:** IFB; 30'; \$3 (silent).
5. ***FACTS ABOUT COTTON FABRICS:** YAF; 42f; \$3.50 (with captions).
6. ***FACTS ABOUT RAYON FABRICS:** YAF; 39f; \$3.50 (with script).
7. ***FACTS ABOUT WOOL FABRICS:** YAF; 41f; \$3.50 (with captions).
8. **HOW TO MAKE A PLASTER CAST:** ALF; 20'; — (sale \$45).
9. ***HOW TO MAKE A PUPPET:** VEC; 36f; \$6 (double frames, with captions).
10. **HOW TO MAKE A SILK SCREEN PRINT:** ALF; 20'; — (sale \$90).
11. ***HOW TO SOLDER:** PL; 43f; \$1.25.
12. **INDUSTRIAL ARTS: HAND SAWS:** YAF; —; — (sales \$50, 1 reel).
13. **INDUSTRIAL ARTS: MEASURING AND SQUARING:** YAF; —; — (sale \$50, 1 reel).
14. **INDUSTRIAL ARTS: PLANES:** YAF; —; — (sale \$50, 1 reel).
15. **INDUSTRIAL ARTS: USING SCREWS AND NAILS:** YAF; —; — (sale \$50, 1 reel).
16. **LET'S WORK WITH SELF HARDENING CLAY:** VEC; 27f; \$3 (with captions).
17. **MACHINE SEWING:** SS; 39f; — (free loan, with captions available 2 versions in 15 and 66 class series, specify).

18. MAKE A MOBILE: BFI; —; —.
19. *NATIVE CRAFTS: CB; 46f; \$3 (with captions).
20. *PAPIER MACHE: VEC; 22f; \$3 (with captions).
21. *PAPER SCULPTURE: CFI; 34f; \$3.95 (color, with captions).
22. POTTERY MAKING—THE CAST METHOD: UC; 18'; —; (sale \$40, silent).
23. *PUPPET BODIES AND COSTUMES: CFI; 22f; \$3.95 (color, with captions).
24. *PUPPET HEADS AND HANDS: CFI; 23f; \$3.95 (color, with captions).
25. *PUPPET STAGE AND SCENERY: CFI; 20f; \$3.95 (color, with captions).
26. *RAFFIA WORK: CFI; 32f; \$3.95 (color, with captions).
27. SILK SCREEN TEXTILE PRINTING: BFI; —; —.
28. TECHNIQUE OF MAKING A CERAMIC TILE: HF; 30'; \$6 (color, silent).
29. *USE AND CARE OF WOODWORKING TOOLS: PL; 58f; \$1.25.
30. USE OF THE POTTER'S WHEEL: HF; 30'; \$7; (color, silent).
31. *WARP AND WEFT: NFB; 11'; —; (color, sale \$75).
32. *WORKING WITH METAL: PL; 46f; \$1.25.

MEDICAL AREAS

- AAA—Adapted media: 6, 175.
- AA—Amputees: 13, 14, 18, 32, 41, 57, 60, 84, 118, 130, 139, 142, 165, 170, 208, 222, 242, 254, 255, 260.
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- P—Rehabilitation: 3, 4, 12, 20, 42, 59, 60, 66, 72, 74, 81, 87, 91, 93, 100, 121, 122, 123, 124, 125, 130, 134, 139, 142, 156, 157, 163, 165, 168, 172, 174, 188, 192, 195, 199, 203, 215, 222, 234, 240, 242, 243, 253, 255, 261.
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SOURCES

Numbers following address refer to films listed in Part I, II. Addresses are given for films in Part III, but not specific references.

AF—Association Films, 35 West 45th St., New York 19: 64.

AGA—American Gas Association, 420 Lexington Ave., New York City: 62.

AHA—American Heart Association, 1790 Broadway, New York City: 37, 132, 176, 178, 190, 223.

ALF—Almanac Films, Inc., 516 Fifth Ave., New York City.

AMA—American Medical Association, Motion Picture Library, 535 N. Dearborn St., Chicago 10, Ill.: 15, 165, 251.

AOTA—American Occupational Therapy Association, 33 West 42nd St., New York 36: 95, 96.

ARF—Arthritis and Rheumatism Foundation, 23 West 45th St., New York 19: 238.

BC—Bridgeport Chapter, Connecticut Society for Crippled Children and Adults, Inc., 85 Park Ave., Bridgeport, Conn.: 80.

BFI—Baily Films, Inc., 6509 De Longpre Ave., Hollywood 28, Calif.

BIS—British Information Service, 30 Rockefeller Plaza, New York City: 121, 182, 208, 232.

BS—Bray Studios, Inc., 729 Seventh Ave., New York 19: 210.

CB—Chas. A. Bennett Co., Inc., 237 N. Monroe St., Peoria 3, Ill.

CFI—Curriculum Films, Inc., 10 East 40th St., New York City.

CL—Cutter Laboratories, Fourth and Parker Sts., Berkeley 10, Calif.: 198.

COFL—Central Office Film Library, U. S. Dept. of Agriculture, Office of Information, Motion Picture Service, Washington 25, D. C.: 10, 41, 42, 57, 72, 81, 117, 123, 130, 139, 163, 172, 179, 180.

CS—Cottage School for Spastic Children, 5105 Dover St., Oakland, Calif.: 36.

CUEF—Columbia University Educational Films, 413 West 117th St., New York City: 25, 61, 119, 183, 194, 201, 212, 224, 227, 236, 241, 246, 248, 262.

CW—Curative Workshop of Milwaukee, Inc., 750 North 18th St., Milwaukee 3, Wis.: 7, 18.

DE—Department of Education, Division of Special Schools and Services, Bureau of Vocational Rehabilitation, Room 105, 1320 K. Street, Sacramento, Calif.: 171.

DL—Dr. Daniel H. Levinthal, 501 S. Beverly Drive, Beverly Hills, Calif.: 143.

DW—Department of Welfare, Harrisburg, Pa.: 192.

EH—St. Elizabeth's Hospital, Chief of O.T. Dept., Washington, D. C.: 56, 104, 145.

FI—Filmstrips, Inc., 140 West 86th St., New York City: 124.

GE—General Electric Company, Film Library, 570 Lexington Ave., New York City: 184.

GHM—Gordon M. Martin, M.D., Mayo Clinic, Rochester, Minn.: 234.

GTI—Goodwill Industries of N. Y., 123 East 124th Street, New York City: 60.

HF—Harmon Foundation, Division of Visual Exp., 140 Nassau St., New York City.

ICD—Institute for the Crippled and Disabled, 400 First Ave., New York City: 134, 153.

IFB—International Film Board, 6 N. Michigan Ave., Chicago 2, Ill.: 88, 187, 193.

IP—Ideal Pictures, 233-239 West 42nd St., New York City: 103, 153.

ISWC—International Society for Welfare of Cripples, 127 East 52nd Street, New York City: 12, 20, 23, 59, 74, 86, 87, 91, 100, 128, 142, 156, 195, 199, 203, 215, 222, 226, 231, 242, 243, 255.

JONAS—Joint Orthopedic Nursing Advisory Service, 2 Park Ave., New York City: 196, 237.

KI—Kessler Institute for Rehabilitation, Pleasant Valley Way, West Orange, N. J.: 254.

LL—Lederle Laboratories, Div. American Cyanamid Co., 30 Rockefeller Plaza, New York: 46.

LM—Liberty Mutual Insurance Co., Rehabilitation Center, Boylston Street, Boston, Mass.: 118.

MB—Dr. Michael S. Burman, 114 East 54th Street, New York City: 38.

MBS—N. Y. Municipal Broadcasting System, Municipal Building, New York City: 261.

MC—Mayo Clinic, O.T. Dept., Rochester, Minn.: 94.

MFG—Medical Film Guild, 506 West 57th Street, New York City: 30, 53, 93, 185, 189, 220, 245.

MH—McGraw-Hill Co., Text Film Department, 330 West 42nd Street, New York City: 27, 52, 55, 134, 135, 136, 137, 152, 174, 202, 204, 209.

MI—Metropolitan Life Insurance Co., Health and Welfare Division, 1 Madison Ave., New York City: 71.

ML—Maryland League for Crippled Children, Inc., 827 St. Paul Street, Baltimore, Md.: 19.

NAMH—National Association for Mental Health, 1790 Broadway, New York City: 47, 82, 85, 90, 127, 152, 177, 181.

NFB—National Film Board of Canada, 1270 Avenue of the Americas, New York City: 3.

NFIP—National Foundation for Infantile Paralysis, 120 Broadway, New York City: 4, 197, 211.

NH—Newington Home and Hospital for Crippled Children, Newington, Conn.: 24.

NSA—North Shore Association for the Crippled, 800 Davis Street, Evanston, Ill.: 98.

NSCCA—National Society for Crippled Children and Adults, Inc., 11 S. La Salle Street, Chicago, Ill.: 1, 5, 8, 49, 120, 126, 138, 188, 264.

NTA—National Tuberculosis Association, 1790 Broadway, New York City 19: 31, 131, 150, 151, 157, 158, 207, 213, 217, 256, 257, 259.

NYFL—New York University Film Library, 26 Washington Place, New York City: 2, 3, 28, 34, 43, 45, 51, 77, 78, 111, 112, 113, 114, 140, 141, 169, 186, 205, 221, 233, 235, 258.

NYS—New York State College of Agriculture, Cornell University, Ithaca, New York; Attn. Film Service: 175.

OH—Orthopedic Hospital, 2400 S. Flower Street, Los Angeles, Calif.: 29.

PAC—Public Affairs Committee, Inc., 22 East 38th St., New York City: 65.

PCR—Psychological Cinema Register, Pennsylvania State College, State College, Pa.: 26, 35, 39, 40, 44, 48, 54, 68, 83, 92, 97, 105, 106, 107, 108, 159, 166, 167, 168, 200, 206, 225, 228, 230, 249, 250, 252.

PCW—PCW Film Service, Pennsylvania College for Women, Pittsburgh, Pa.: 191.

PFC—Princeton Film Center, Princeton, N. J.: 67.

PL—Photo Lab Inc., 3825 Georgia Ave., N. W., Washington 11, D. C.: 6.

PSAS—Prosthetic and Sensory Aids Advisory Service, VA, 252 7th Ave., New York City: 13, 14, 32.

RH—Riley Hospital, C. P. Clinic, Indianapolis, Indiana.

SC—Sonotone Corporation, Educational Department, Box 200, Elmsford, New York: 11.

SCF—Spastic Children's Foundation, Inc., 1307 W. 105th Street, Los Angeles, Calif.: 99.

SEP—Sheppard and Enoch Pratt Hospital, Director of O.T., Towson 4, Maryland: 116.

SIF—State Insurance Fund, Ponce de Leon, San Juan 8, Puerto Rico: 125.

SPR—St. Paul Rehabilitation Center, 279 Rice Street, St. Paul, Minnesota: 102.

SRC—Seattle Rehabilitation Center, 708 Fourth Ave., Seattle, Wash.: 66.

SS—Singer Sewing Machine Co., Educational Division, New York City.

TFP—Therapeutic Film Productions, Inc., P. O. Box 311, Beacon, N. Y.: 70.

UC—University of California, University Extension, Visual Dept., 2272 Union Street, Berkeley, Calif.: 76.

UM—University of Minnesota, Audio-Visual Education Service, Minneapolis, Minn.: 239.

USA—Commanding General, attention-Surgeon: First Army (Me., N. H., Vt., Mass., R. I., Conn., N. J., N. Y.), Governors Island, New York 4, N. Y.; Second Army (Pa., Del., Md., Va., O., W. Va., Ky.), Fort George G. Meade, Maryland; Third Army (N. C., S. C., Ga., Fla., Ala., Tenn., Miss.), Fort McPherson, Atlanta Ga.; Fourth Army (Ark., Tex., Okla., N. M., La.), Fort Sam Houston, Texas; Fifth Army (Ill., Mich., Wis., Mo., Kan., Ia., Neb., Minn., N. D., S. D., Wyo., Colo., Ind.), 1660 E. Hyde Park Blvd., Chicago, Ill.; Sixth Army (Wash., Ore., Idaho, Mont., Utah, Nev., Ariz., Calif.) Presidio of San Francisco, California: 16, 22, 63, 73, 84, 110, 129, 144, 160, 161, 162, 173, 214.

USC—University of Southern California, O.T. Department, Los Angeles, California: 164.

USDD—U. S. Department of Defense, Office of Public Information, Washington 25, D. C.

USDL—U. S. Department of Labor, Washington, D. C.: 122.

USOE—U. S. Office of Education, Washington, D. C.: 21.

UWF—United World Films, 1445 Park Ave., New York City: 89, 216, 218, 219, 229, 240, 244, 247, 260, 263.

VA—Veterans Administration, Washington 25, D. C.: 17, 50, 69, 79, 109, 133, 146, 147, 148, 149, 154, 155, 170.

VEC—Visual Education Consultants, Inc., 2066 Helena St., Madison, Wis.

WSC—Washington State College, Audio-Visual Center, Pullman, Wash.: 58.

YAF—Young America Films, 18 East 41st Street, New York City.

ZGA—Zurich General Accident and Liability Insurance Co., 135 S. La Salle Street, Chicago 3, Ill.: 9, 75.

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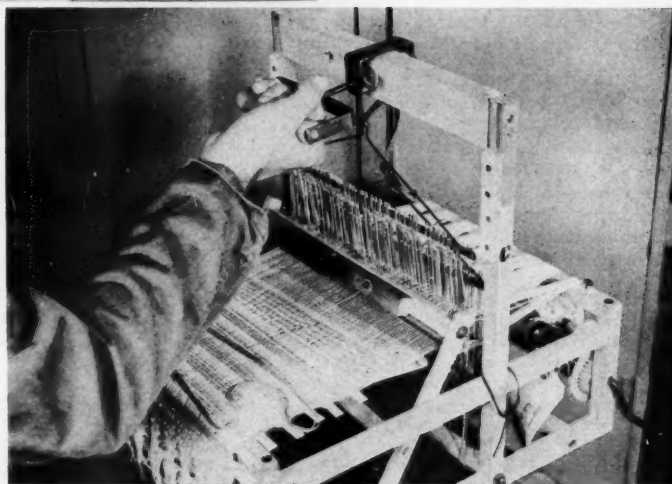
Picture Page

This page is a new feature and contributions are welcome. The pictures used for this issue are submitted by Major Myra McDaniel, WMSC, Brooke Army Hospital, Fort Sam Houston, Texas.



This 6"-high platform has a well to allow the leg to reach into complete knee extension when operating the floor printing press.

A pronation-supination adaptation made on a two harness table loom. The shed is held open when the maximum excursion is attained in either pronation or supination.



A two harness roller type floor loom used here for strong grasp and flexion-extension range of the wrist. The shed may be held by means of a ratchet, or a patient may step on pedal to hold the shed open, once it is attained by wrist motion.

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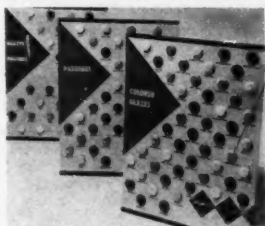
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AJOT IX, 2, 1955, Part II

Have You Tried?

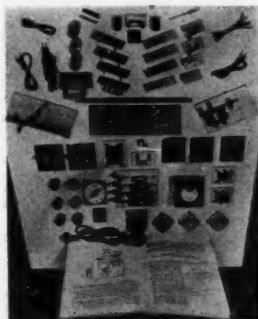
A new silver plated metal for vitreous enameling is now available from the Thomas C. Thompson Co., 1539 Deerfield Road, Highland Park, Illinois. The metal can be fired at 1450-1500 degrees F, and the beautiful shades of opaque or transparent colors possible only on silver can be obtained with a cost little more than copper.



A new card of glazes has been devised by Pemco Corporation, Baltimore 24, Maryland. The objective of Glaze Selectors is to allow you to select glaze by sight and not by name.

There are three cards covering cone 06 glazes, \$5.00, cone 010 glazes, \$2.80, and pasgobes, \$4.10. Firing to secure permanent samples can be completely eliminated.

A new cartridge fed, felt tip marking pen which eliminates soiled hands and ink smudges is produced by Binney and Smith, Inc., 380 Madison Ave., New York 17, N. Y. Feather-Mark is capable of writing fine, medium-board or heavy lines at will, is made of strong, polished aluminum, and guaranteed for a lifetime service (\$4.50).



A basic electronic kit, Model 50-A, is now available from Crow Electric-Craft Corp., 1102 Shelby St., Vincennes, Indiana. It permits patients who have completed the beginners' electricity course to advance into the study of electronics.

Its value is that patients "learn by doing." By performing the experiments, they grasp the relationship of one principle to another.

A colorless, odorless, stainless adhesive compound can solve your problem of tack board and displays. Bulletin Board Styx retains its adhesive strength and will not weaken permitting materials to fall or become disarranged. Avoids use of nails, tacks, glues and tapes and is available from Lea A-V Service, Box 951, Albert Lea, Minnesota.

Countless leathercraft projects and interesting kits are described and illustrated in the new 72-page Osborn Catalog No. 21 available for 25c from Osborn Bros. Supply Co., 2306 E. Washington St., Dept. A., Joliet, Illinois.

Long strips of cotton, nylon, rayon and mesh for weaving, crocheting and braiding can be obtained from Ralph S. Stichler & Son, 230 Wood Street, Reading, Pa. Bulk prices are available.

A "Tilt-A-Way" table for users of wheel chairs is available from Moxhart, Inc., 3933 Crary Drive, Toledo, Ohio. Easily attached to any wheel chair having tubular construction, the table can be used as a hobby table, for writing or for feeding trays.

A lint-free, absorbent cloth called "Super-Wipe" can be bought in bulk from the Leshner Corporation, Hamilton, Ohio.

A bulletin of new books on psychiatry, psychology and neurology can be obtained from Robert Brunner, 1212 Avenue of the Americas, New York 36, N. Y.

A paste type hand cleaner that can be used with or without water is available from the Gus J. Schaffner Company, Emsworth, Pittsburgh 2, Pa. "Little Doc" Disolvit should prove exceptionally useful to occupational therapists working on the wards.

After dealing exclusively in the leathercraft supply business for twenty years, the J. C. Larson Company, 820 S. Tripp Ave., Chicago, Ill., is branching out and offering a complete supply in metal (copper, brass and aluminum) in all weights for tooling, etching, moulding and enameling. They can also supply five different kilns for enameling copper.

If you would like to add variety and fun to your craft activities, send for SUJI, a kit for making entertaining and creative wire art forms. The kits are offered by X-acto, Inc., and may be purchased in hobby stores locally.

SUJI features multi-colored copper wire which can rapidly be made into novel knick-knacks and figures. Its wire can also be used in combination with pipe cleaners, raffia, ribbons and yarns to add variety and to stimulate ingenuity.

The A. V. Curt Co., Inc., 224 South Blvd., Tampa 6, Fla., one of the leading manufacturers of hobby craft jewelry, design their findings and kits so that they can be utilized by the occupational therapy patient, as they are aware of the very im-

portant aspect that the patient must have something interesting to do. They have created neat and beautiful lines of inexpensive kits which can be used for exercise while the patient is either lying or sitting.

* * *

The Anderson Leather Co., Box 922, Brockton 64, Mass., offers a new pattern in a one inch braided belt. It is styled for both men and women, is available in four colors, and has rounded edges for a more attractive appearance.

* * *

A new standing table (tilt table) has been put on the market by J. A. Preston Corp., which permits bed patients to be brought from wards to occupational therapy departments. The patient being safely and comfortably secured on the table can do crafts, weave, etc. The unit comes with four casters (two have step-on brakes), and is easily moved through narrow doorways, halls, and in elevators. It consists of a sturdy triangular base and a tilt table 22" wide and 72" long; height of top is approximately 36". Table can be manually tilted with greatest of ease up to 70°.

The unit is economically priced at \$190 complete with casters and two padded safety straps (catalog number is PC 7194-C); a one inch foam rubber pad is available at \$28.75 additional. It is manufactured and sold by J. A. Preston Corp., 175 Fifth Ave., New York 10, N. Y. An illustrated sheet will be sent on request.

* * *

An ideal medium for patients interested in modeling with plastic is offered by Sculpture House, 304 W. 42 St., New York City. It is Duron Modeling Plastic which can be formed by hand with sculptors' tools. Work may be interrupted for long periods and the plastic remains pliable and may be used over and over until made permanently hard by baking. It is pure white, semi-translucent, but may be colored by kneading pigments into the material or brushing the surface. After the plastic has been hardened, Duron may be colored by brushing or spraying with Della Robbia Glazes.

* * *

More and more occupational therapists are including craft metal projects in their programs. They find that patients achieve professional-like results amazingly easy when Mirror-Finish aluminum and Safe-T-Etch are used. More information, including how-to-do-it instructions, is available from Metal Goods Corporation, 5250 Brown Avenue, St. Louis 15, Missouri.

* * *

*The Rex Corporation, manufacturers of plastic extrusions for craftstrip, is offering their 32-page booklet "101 Uses for Craftstrip" by Cy Vauhgn. "101 Uses" is a comprehensive, fully illustrated

instruction book which carefully describes, step by step, how to make colorful articles such as bracelets, earrings, tie clasps, bar pins, belts and other useful items. Instructions are given for weaving, wrapping, braiding, lacing, winding and overbraiding. For further information and copies of "101 Uses for Craftstrip," write directly to the manufacturers, The Rex Corporation, 201 Hayward Road, West Acton, Massachusetts.

* * *

Information, including how-to-do it instructions about Mirror-Finish aluminum and Safe-T-Etch, can be obtained from Metal Goods Corporation, 5250 Brown Avenue, St. Louis 15, Mo.

* * *

The S & S Leather Co., Colchester, Conn., has just added to its wide line of leathers and leathercraft kits a new series of thirteen "Budget Priced" thrift articles in genuine top grain cowhide. These kits range in price from 13c to 75c each. Included are a rosary case, combcase, wrist purse, four different coin purses, two billfolds, two keycases, an eyeglass case and a child's Beanie, all available in seven lovely colors. Each item is pre-cut, and pre-punched (if desired), and is furnished with lacing to match. These articles are excellent time-savers for the overburdened therapist and are ideal for non-ambulatory patients.

* * *

A plastic bobbin offered by Prudential Products, Inc., Dept. F, 305 McClatchy Building, Upper Darby, Penn., simplifies crocheting. The Hop-O-My-Thumb kit includes the patented bobbin, illustrated instructions and 30 original pattern designs.

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Book Reviews and Abstracts

TREATMENT OF ACUTE POLIOMYELITIS

William A. Spencer, M.D.

Charles C. Thomas

Springfield, Ill.

Reviewed by: Eleanor Ring, O.T.R.

Dr. Spencer's second edition reflects the experience of the contributing editors during the last four years of attention to the management of acute and chronic polio at the Southwestern Poliomyelitis Respiratory Center in Houston, Texas. The syllabus was prepared as a teaching aid to show the interrelation of the many "facets" of modern polio care with the emphasis being placed on the medical treatment of the patient with respiratory involvement. The material is presented with a practical viewpoint in a clear-cut concise manner. For the occupational therapist it might serve as a good up-to-date reference book.

PROGRESS AND PROBLEMS IN MENTAL HOSPITALS

Proceedings of the Fifth Mental Hospital Institute

Published by

American Psychiatric Association Mental Hospital Service

Reviewed by: Bertha J. Piper, O.T.R.

The need for scientific evaluation of the effectiveness of psychiatric therapies for the mentally ill; legal rules governing hospital administrative procedures; coordination of planning and publishing follow-up studies on discharged patients; patient activities conducted by ward personnel; industrial activities and job placement for patients within the mental institution; these and numerous other moot topics of vast importance to the hospital administrator are recorded in "Progress and Problems in Mental Hospitals." The Proceedings are edited by Daniel Blain, M.D., and the contents provide stimulating thought for all who are concerned with the intricate problems relevant to mental illness. The Fifth Mental Hospital Institute was held under the auspices of the American Psychiatric Association, Mental Hospital Service, at Little Rock, Arkansas, October, 1953. Administrators from forty-five states, the District of Columbia, Hawaii, and Canada, attended the group sessions.

GUIDE TO STANDARDS FOR RESIDENT CAMPS FOR CRIPPLED CHILDREN

Mrs. Evaline E. Jacobs

Published by

National Society for Crippled Children and Adults

Chicago

1954

\$1.50, 31 pp.

Reviewed by: Caroline G. Thompson, O.T.R.

This attractive new paperbound booklet, outlining standards for resident camps for orthopedically crippled children, is designed to help education and recreation directors and others working for crippled children at camp. It gives detailed information on how camps can be made safer, more effective and more rewarding for the children who attend them. Mrs. Jacobs is program analyst and consultant on camping for the National Society for Crippled Children and Adults, and her booklet has received the endorsement of the American Camping Association, standards setting organization for camping in the United States.

Topics include objectives, physical plant and equipment, admission policies and procedures, health and sanitation, safety, administration, and two extensive sections on program and on the duties and qualifications of personnel. The inclusion of occupational therapy in the pro-

AJOT IX. 2. 1955. Part IZ

gram is recommended as desirable, this treatment service to be under the direction of the camp physician, in consultation with the child's home physician. Emphasis is on training for self-help, hand skills and physical improvement.

Mrs. Jacobs has taken account of the specialized needs of handicapped children, and recommends that all physical activities should fall within the frame of the care and treatment program. Special information is requested on the application blank regarding muscle chart and recent medical history. This makes it possible to focus the program on the needs of the individual child. The booklet is clearly printed on glossy paper, and illustrated with attractive photographs and line drawings of camping experiences.

DIRECTORY FOR EXCEPTIONAL CHILDREN

Edited by

E. NELSON HAYES

Published by

Porter Sargent Publishers

11 Beacon St., Boston, Mass.

96 pp

1954

\$1.10

A compact listing of schools and other facilities, classified by type, which serve the exceptional child. An excellent reference handbook for therapists counselling parents or teaching a course in community resources.

EXPERIMENTAL ELECTRICITY FOR THE BEGINNER

The Scientific Book Publishing Co.

Vincennes, Ind.

1954

284 pp.

A well illustrated, simply documental course of study for beginners. This textbook is an excellent reference for occupational therapists because its simplicity enables therapists to utilize these studies as a new activity for patients of all ages.

THE HEALTH OF REGIONVILLE

Earl Lomon Koos

Published by

Columbia University Press

1954

Reviewed by: Barbara Locher, O.T.R.

This book is not only the result of systematic investigation but exceptional reporting. It makes the book not only readable but gives valuable information for those of us who work in any related health field. What the people of Regionville think about health problems is the essence.

A representative town in New York State was selected for the study. More than 500 families were interviewed regularly over a period of four years. The people were divided into three socio-economic groups: professional, skilled and semi-skilled, and unskilled. It is on the basis of this division that conclusive evidence regarding ignorance about disease symptoms, the use of hospitals and doctors is affected by the socio-economic group to which one belongs. Dr. Koos not only provides ample tabulations but provides direct quotations from those people interviewed.

What Regionville thinks about illness, the use of the physician, the use of the hospital, the druggist, the non-medical personnel and other health problems can substantially help us in our patient relations. We can better interpret our work through understanding of these people. This would hold true not only of the patient but of the hospital community where one works.

In his chapter on Dilemmas and Possibilities, two sections alone would be worth reviewing, "the perception of

the worth of treatment" and "implications for the hospital."

It is not intended that this book shall answer questions, rather it raises questions and dilemmas to further the study of illness or health in its broadest sense.

AN OUTLINE OF NEUROLOGY

Published by
Ian A. Brown, M.D.
Wm. C. Brown Co.
Dubuque, Iowa

1954

\$2.00

Reviewed by: Eleanor Ring, O.T.R.

The purpose of this treatise seems to be to present a broad view of clinical neurology in simple outline form. The author states that it is in part written for nurses, physical therapists and occupational therapists. At the beginning of each section there is a brief review of neuroanatomy as related to the conditions described. Diagrams are provided throughout. Disorders of the peripheral nerves, of the spinal cord, of the brain and of muscle function are covered in topical outline. The information on each diagnosis includes: causative factors, clinical picture, prognosis and treatment procedures. With its complete index, this outline becomes a good source for quick reference for material dealing with neurological disorders.

SELF-HELP DEVICES FOR THE ARTHRITIC

Rehabilitation Monograph VI
Edward W. Lowman, M.D.

The Institute of Physical Medicine and Rehabilitation
New York University—Bellevue Medical Center

1954

\$1.00, 123 pp.

Reviewed by: Elizabeth Collins, O.T.R.

A monograph presenting an extremely comprehensive coverage of self-help devices. Although this was written primarily for arthritics, occupational therapists will find it equally useful with many other types of physical disabilities.

Dressing, feeding and personal hygiene are presented in the first section followed by a variety of types and adaptations of beds and wheelchairs. Crutches, canes, utility sticks, and home-saving equipment are also included. A section of miscellaneous items such as adaptations for radio, sewing, typewriter, reading and automobile complete the illustrated descriptive material.

While there are no exact specifications given for the construction of the individual devices the pictures and text are presented in such a way as to make this an unimportant limitation.

Sources of purchase and prices are included for those devices which are commercially manufactured.

This monograph is particularly recommended for those therapists working in rehabilitation clinics and with chronically disabled persons.

A SIMPLE HAND GRASP PROJECTOR

Harry E. Barnett, M.D.
Meyer A. Perlstein, M.D.

American Journal of Physical Medicine
October, 1954

Reviewed by: W. R. Dunton, Jr., M.D.

This is a brief description of a projector made of wire which is illustrated and of proven value. It is possible for a person of but slight skill to reproduce it in several lengths, though 21 inches is the average length. It can "grasp and lift various shaped objects, from a match to a urinal, to ten pounds in weight . . . provides surprisingly good lifting power and adequate rigidity." With little practice patients with extraneous motions, such as athetosis, Parkinsonism, or tremors may learn control.

MUSIC AS AN ADJUNCT IN THE TREATMENT OF BRAIN-DAMAGED PATIENTS

Beatrice Fields

American Journal of Physical Medicine
October, 1954

Reviewed by: W. R. Dunton, Jr., M.D.

The author's summary is as follows: "In order to use music as an adjunctive treatment for brain-damaged patients, three factors are necessary: 1) knowledge of the pathology and prognosis for improvement of the patient, 2) knowledge of the components of music and ancillary disciplines that can be manipulated to meet specific problems, and 3) cooperation of a treatment team.

"Treatment consists of participation with the therapists, by the use of simple rhythm and notes on a piano keyboard in promoting muscular activity and purposeful movement. Procedures include guiding motion through the developmental patterns of neurological growth, training for the substitution of undamaged nerve pathways for damaged ones, as suggested by the theories of Lashley.

"Improvement in coordination among 24 of 28 patients treated suggests the value of the use of music as an adjunct in treatment for selected brain-damaged patients in the area of coordinated motion."

AN OUTLINE OF PSYCHIATRY

Clarence J. Rowe, M.D.

Published by

Wm. C. Brown Co., Dubuque, Iowa

1954

Reviewed by: Bertha J. Piper, O.T.R.

The author has presented a formal, comprehensive, topical outline of subject material essential to a good introductory course of study in functional and organic mental disorders. It includes treatment procedures in current use such as psychotherapy, coma, electroshock and surgery. Conjoined in the section on "Management Therapy" are topics dealing with occupational therapy, attitude therapy, recreational therapy, and hydrotherapy. The brief explanation for each of these treatment procedures is acceptable but the connotation of the title *management therapy* is less favorable, it seems to this reviewer, than the customary phrase, "ancillary" or "adjunctive," as already contained in the introductory remarks of the outline. "Management" would imply a disciplinary purpose; "adjunctive" relates to a larger group organization concerned with a common objective of therapeutic significance.

Cases are described to illustrate various kinds of symptomatic behavior. A complete index, a short supplementary reading list, and a table of contents are also valuable in making this sixty-page outline a useful document.

PSYCHOPHYSIOLOGIC MEDICINE

Eugene Ziskind, M.D.

Published by

Lea & Febiger, Philadelphia

1954

370 pp.

Reviewed by: Bertha J. Piper, O.T.R.

This book is written for the practitioner in the general medical clinic who seeks wider knowledge of interviewing techniques and more astute awareness of personality patterns. It also informs the general practitioner who wishes to delve still further into the subject of psychopathology as to the importance of integrating numerous aspects of background data such as child-parent relationships and cultural influences. The reader is introduced briefly to the viewpoints of Freud, Adler, Jung, Rank, Horney, Sullivan, Fromm and Meyer. Illustrations of many of the mental adaptive mechanisms, and descriptions of certain psychosomatic diseases, are explained.

SYMPOSIUM REHABILITATION OF THE BRAIN-INJURED

The Physical Therapy Review
Vol. 34, No. 12, December, 1954
Reviewed by: Adaline J. Plank, O.T.R.

RESTITUTION OF MOVEMENT FOLLOWING BRAIN INJURY Walter J. Treanor, Capt., MC.

This is a technical paper citing evidence both experimental and clinical that there is considerable spontaneous restitution of movement following damage to the brain or its relays to spinal motor centers. This restitution occurs selectively, appearing "earliest and most persistently in muscle groups subserving posture. It has been pointed out that there is ample reason for the existence of this selectivity, in the nature of the afferent fibers themselves, in the organization of spinal reflexes, and in the modification of reflexes by supraspinal relays."

"Recovery, occurring spontaneously in the flexors of the arms and the extensors of the leg" is "likened to that 'lesser level of evolution' described by Hughlings Jackson." To continue, "Emphasis, throughout," is "on the nature of spontaneous, as opposed to therapeutically-influenced, recovery in muscle function following brain injury."

This material is helpful to an occupational therapist working with brain injured patients in order better to understand the physiology of the muscles in this group of diagnoses. It is "heavy reading," though, and has more value, perhaps, for the physical therapist who works with the total musculature of the body.

* * *

PATTERNS OF RESTITUTION OF MOTOR FUNCTIONS

Walter J. Treanor, Capt., MC, &
Raoul C. Psaki, Lt. Col., MC

Seventy patients with various brain injuries, including thirteen cerebral palsy patients, were observed, and the levels of spontaneous restitution of their motor functions are described. (The cerebral palsy patients were chosen without primary cerebellar damage, tremors, athetosis or rigidity as the authors found that physical therapy could do little to reverse those disabilities.) There were found to be four levels of motor recovery: gross limb synergies (twenty-nine patients with a resulting stiffly-extended leg and a flexed upper extremity: the postural position); restored volitional movements at elbow and knee joints (ten patients); restored distal muscle functions with less recovery in proximal muscles (twenty patients); complete return of all motor functions (eleven patients). Fifty-seven of these patients had sensory deficits which interfered with their motor recovery.

These findings are important to an occupational therapist treating a patient with a recent brain injury as they describe well the order in which the groups of muscles of the extremities return to motor function, as well as favorable positions of the extremities for maximum movement of parts (such as at the level of recovery in distal muscles, the patient can flex fingers and thumb to a greater extent when he is standing).

* * *

SELECTIVE REEDUCATION AND THE USE OF ASSISTIVE DEVICES

Walter J. Treanor, Capt., MC, Olena M. Cole, Major,
WMSC, & Rosie Dabato, 1st Lt., WMSC.

The muscle reeducation program on these seventy brain injured patients was selective in that the authors emphasized the retraining of the opposers to the postural muscles; for example, leg flexors and arm extensors. Second, they attempted to slow down the returning motor function of the postural muscles by restricting ambulation until late

in recovery. Third, various braces and splints were used for protection of weak muscles.

The progression of the muscle retraining program was: proper positioning of the paretic limbs in bed; stimulation and exercise of leg extensors and trunk muscles while in bed and, then, by standing (leg splints and abdominal supports were used in early standing); temporary "grounding" of patients; reeducation of postural opposing muscles—leg flexors and arm extensors; exercise of distal muscles of leg (dorsiflexors and evertors of foot) with temporary brace on foot to allow limited walking; exercise of extensor hand muscles with attention paid, also, to abduction of thumb and of individual digits, reeducation of proximal fixator muscles of shoulder and hip.

The material here on retraining the muscles of the upper extremity is most pertinent to occupational therapy as it explains the need for caution in treating these patients. The occupational therapist must guard against overstretching, and so permanently impairing the weaker extensors of the fingers by over-exercising the more quickly recovered finger flexors. Also, the hand should not be used early in treatment without support for elbow and shoulder as the supinators of forearm and fixators of shoulder return more slowly to function. Since these shoulder muscles aid greatly in fine hand coordination and are capable of fine activities themselves, they should be protected until the fullest extent of recovery has been reached.

TWO LEGS TO STAND ON

Published by
John D. McKee
Appleton-Century-Crofts, Inc.
New York

1955

\$2.75, 180 pp.

An autobiography of a cerebral palsied person, written with humor and frankness and notably lacking in self-pity. The author's experiences are related to show the wide scope life can offer to a person handicapped only physically, if his attitude and personality is allowed to expand and meet life.

This book can encourage parents and patients because of its true life experiences written in an easy, readable style. As the author states, "Out of the material at hand and with the tools God left me I have created and am creating a full life."

ADAPTED PHYSICAL EDUCATION

Arthur S. Daniels
Published by
Harper and Brothers, Publishers
New York

1954

538 pp.

Reviewed by: Barbara Locher, O.T.R.

This volume from the Harper's series in school and public health education, physical education and recreation should prove of interest to those therapists working with physical education specialists in hospital recreation, or assuming responsibility directly or indirectly for the physical education aspect of the occupational therapy program. It should prove a guide and stimulus to those considering a broader scope of media in the occupational therapy treatment program.

The book is a text on principles and practice of physical education for exceptional students. The following quotation from the jacket of the book is appropriate: "This sound and practical volume provides an exceptionally useful guide for all those concerned with aiding the handicapped through physical education and recreation."

TRAINING AND RESEARCH
PRESENT STATUS, BACKGROUND AND
SUGGESTED PLANS FOR THE FUTURE

William Malamud, M.D.

*Journal of Clinical and Experimental Psychopathology
and Quarterly Review of Psychiatry and Neurology*
Vol. XV, No. 2, June 1954

Reviewed by: Barbara Locher, O.T.R.

The printed article was an address before the National Governors' Conference on Mental Health, Detroit, Michigan, February 9, 1954. It begins with good reference to the Report on Training and Research by the Council of State Governments in 1953.

The essence of the address seems to be a keen, logical and well developed plea for expansion of research in the area of mental illness. Some high points in the mutually interdependent functions of research and training are discussed.

Cited is the paradox that a time when progress in psychiatry is at a peak, we are still plagued with the problem of overcrowded, understaffed hospitals. It is clearly pointed out that the answer to this paradox is not the simple reason of an increased rate of mental illness. The more important though more complex reasons for the paradox he discusses as: (1) The gap between the acquisition and the application of knowledge. (2) How increased research increases our knowledge and our awareness of new problems and multiplies the need for further study.

Dr. Malamud's proposed solution is in training capacities for the disciplines in the mental health field. He discusses three phases of such training: candidates, facilities and teachers. Under the latter, he develops a strong argument for research directors in psychiatric institutions. The conclusion of his paper is the development of the thesis that as research succeeds it also tends to instill the team and multidisciplinary approach. The task ahead in the area of psychiatry is great—but possible.

This excellent article should be added to the reading agenda of all occupational therapists in psychiatry associated with teaching and training programs. There are interesting implications for our profession in this article. Statements follow that seem particularly provocative for us.

"... basic research work is not primarily concerned with the practical application of the results. It is because of this that very important contributions can be made by workers, who may not be able to impart to others either the meaning or manner of application of these discoveries in practical work."

* * *

"The establishment of a well organized research program . . . will bring with it an attitude of critical judgment, a dissatisfaction with slipshod and haphazard work, and a shift from empirical practice to a more exact, efficient, and rational approach to treatment and management."

PSYCHOTHERAPY—A REVIEW AND AN
INTEGRATION

Jules H. Masserman, M.D.

Bulletin of the Menninger Clinic
Vol. 18, No. 4, July, 1954

Reviewed by: Bertha J. Piper, O.T.R.

The three epochal stages in the scientific progress of psychotherapy, "the mystical, the taxonomic, and the dynamic," are reviewed and integrated with compelling interest by the author of *Principles of Dynamic Psychiatry*. In the first area are found mythical and magico-religious forces personified by gods of passion and fury, demigods concerned with man's behavior on earth, and gods whose edicts as to the conduct of the universe were to be obeyed

because "They can reward or punish without reason or appeal." Thus, "we have in man's most ancient personifications the prototypes of what Freud regarded as the forces that govern man called, in what he recognized were neomythologic terms, the Id, Ego, and Superego of man's own psyche."

The "taxonomic stage" refers to the classification of data—an "essential phase in our organization of knowledge," and is not to be considered static nor unfruitful. "We are now beginning again to appreciate that nosologists like Kahlbaum, Mayer-Gross, and Kraepelin were masterful clinical observers still capable of teaching important facts about human behavior to many of our starry-eyed youngsters impatient to plunge headlong—and without a life-belt—into what they like to call 'depth psychology.'"

Twenty years of experimentation and research by Dr. Masserman and his colleagues have contributed immeasurably to scientific profundity circumscribing the dynamics of human behavior. At variance with certain practices of modern psychiatry involving psychosurgery, he declares, "We may venture to admit that much of mysticism and unscientific empiricism remains operative in the theory and practice of modern psychiatry."

Summaries of eleven experiments with neurotic animals are reviewed in the article describing responses to varied stimuli. The author argues that "men do differ psychologically from animals, but that the differences consist mainly (a) in the complexity and versatility with which human beings elaborate both 'normal' and 'neurotic' behavior, and (b) in their possession of several transcendent articles of faith (or delusion) which animals, at least, never verbalize," and which, in the newest parlance of the "dynamic" era, are known as "Ur-defenses." There are, then, mysterious "ubiquitous beliefs" involved in these "erotic yearnings" that have to be reckoned with as an entity entrenched in the personality of the individual, and in attempting to re-establish them "... wise psychiatrists eventually learn—along with wise teachers and ministers—that truly to help a man, one must help him rebuild his own universe of useful fact and fancy and, largely on his own terms, his own faith in himself, in his fellowman and in his personally conceived God."

THE TREATMENT MILIEU

Stanley E. Willis, Lt. (MC) USN

The United States Armed Forces Medical Journal
Vol. V, No. 5, May, 1954

Reviewed by: Alice M. Clement, O.T.R.

The purpose of the paper is to present several concepts concerning the relationship between the treatment milieu and the prognosis of mental disorders with particular reference to schizophrenia. Milieu includes not only the physical dimensions and facilities in which treatment is undertaken, but the attitude of the medical and nursing staff as well. One of the areas in need of critical re-evaluation is the attitude of part of the medical profession itself toward the prognosis of that group of mental disorders labeled incurable so that its victims are doomed to ultimate deterioration and dementia. The writer's opinion is that success in treatment of such disorders is limited by the pessimistic and nihilistic attitude of all those caring for the patient. He is surrounded by rejection even in the hospital situation which may materially aggravate the emotional threat which precipitated the psychotic reaction. In this U. S. Naval hospital, in order to create a favorable milieu, the entire staff is oriented to the psychodynamic approach. This includes a four-months course of instruction for the corpsmen. The treatment team is made aware of the fact that the patient's behavior is symptomatic. The patient is in a milieu of acceptance and understanding at all times and not just during the hour with his doctor.

The results of this program have demonstrated the effectiveness of this milieu. They are getting satisfactory remissions faster since the concept has been accepted by the staff. The writer states that one of the aims of modern psychotherapy is to help the patient learn how to remove blocks to his inherent impulse in order to grow toward maturity and adequacy. He believes that the opportunities for this are provided in an educative social experience in a community matrix and not in the type of hospital which places its emphasis on custody. Current experiences as well as the "working through" of past experiences should not be disregarded in the treatment care of the patient.

THEMES IN NURSING SITUATIONS

Hildegard E. Peplau
The American Journal of Nursing, Oct., '53

First of a series of articles describing themes that nurses encounter in relationship with patients that also apply to the interpersonal relations of occupational therapists.

The article describes a theme as the recurring pattern in patient behavior which establishes a "hypothesis for studying their present relations [and] makes it easier for professional workers to study how their present responses might be reinforcing trends laid down long ago."

One theme discussed is the use of power, both rational and irrational.

FLORICULTURAL ACTIVITIES IN A VETERANS ADMINISTRATION HOSPITAL

Heyward H. Horry, O.T.R.
Journal of Rehabilitation
Vol. XX, No. 2, March-April, 1954
Reviewed by: Karl L. Ireland, O.T.R.

Report of a pilot project in which the enthusiasm of local garden club members was channeled into operation of a flower arranging and corsage making course with definite therapeutic results for both open and closed ward patients. Cooperation among the local florists, garden club members, and the occupational therapists brought increases in patient socialization, personal satisfaction from improvement of techniques, increase of artistic perception, opportunity for creative work, and a continuing interest on the part of patients who had not previously shown such interest in any activity. For some patients, the program afforded a certain amount of prevocational try-out and training. Development of cohesiveness in a group of people of widely varying backgrounds and interests was felt to be one of the outstanding values derived.

OCCUPATIONAL THERAPY EQUIPMENT FOR TREATMENT OF THE LOWER LIMB

Mary S. Jones, M.C.S.P., M.A.O.T.
The British Journal of Physical Medicine
August, 1954

Reviewed by: Carlotta Welles, O.T.R.

This is a thorough discussion on an old but ever present problem, written by an occupational therapist who is well known in England. The paper is based on the treatment of 1,238 cases treated in her department at the Farnham Park Recuperative Home, Slough Industrial Health Service. Included are photographs and working drawings of a bicycle saw and filing machine, ankle rotator saw, foot power lathe with special adaptations, and scroll saw. The author discusses the types of cases treated on this equipment and offers some interesting comment.

It is suggested that there is value in static contraction

of hip muscle groups "in maintaining sliding action of the fascia" and in encouraging tonus of muscles which may be engaged in holding rather than in repetitive exercise. The question is again raised of the resistance offered by the material itself in sawing and filing. It is believed that harder wood and thicker metal do offer increased resistance though the method of work must also be considered.

Two suggestions seem particularly applicable to occupational therapy in this country. The pace or rate of operation of bicycle and treadle equipment has a significant effect in bringing in or ruling out individual muscles presumably being exercised. Palpation of these by both therapist and patient is recommended so that optimum rate of operation can be set and maintained. The application of local radiant heat to injured parts while the equipment is being operated is recommended, as it not only is pleasing to the patient but encourages effective exercise of the part.

TEAM APPROACH TO UPPER EXTREMITY PROSTHETIC PROBLEMS

Edward E. Gordon, M.D.
New York
Archives of Physical Medicine & Rehabilitation
Vol. XXXV, No. 7, July, 1954
Reviewed by: Florence M. Stattel, O.T.R., M.A.

This article gives a clear, comprehensive team approach to the problems of upper extremity prosthetic problems. It starts with the early amputation and takes the patient through planned supervised program to the job. The necessity of training by the therapist is emphasized for performance efficiency of the limb.

CARE OF THE LONG-TERM PATIENT

Dean W. Roberts, M.D., M.P.H.
Published by
Journal of Chronic Diseases
Vol. 1, No. 1, January, 1955
Reviewed by: Barbara Locher, O.T.R.

This article is better defined by its subtitle "A Summary of the National Conference." The definition, structure, composition and the field of operation of the commission on chronic illness is outlined. Essentially this, the second conference, was held in Chicago in March, 1954, and this report attempts to present some of the results of those meetings.

Within five structured committees, twenty-eight study groups were assigned segments of the conference objectives ten months before the conference. At the conference, however, the shuffle into discussion groups was on general terms. The earlier study groups and specialists were available to each discussion group. Like many conferences—the objectives tend to level too much in the way of possibilities. However, in this instance the results of discussions have been summarized and presented so that certain definitions of "the long term patient" and his numerical numbers was pinpointed.

The thinking and the composition of this conference have significance for those of us in occupational therapy.

Five million, three hundred thousand people need long term care; i.e. at least thirty days in a general hospital or care for a continuous period of more than three months in another institution or home.

The summary statements of the discussion groups are challenging and worth reading. The emphases are on the person-patient and on the non-status quality of chronic illness.

The article is a forerunner of a detailed report to come. In it recommendations and principles will be set forth. It behooves us to know what people concern them-

selves with the problem of the chronically ill, what they think in terms of written reports, and to concern ourselves actively with the growing concepts of the application of occupational therapy.

RECOVERY FROM APHASIA

Joseph M. Wepman, Ph.D.

The Ronald Press Company, New York. \$5.50

This is an excellent guide for nurses, relatives and others who must care for the aphasic patient without the services of a trained speech therapist. He gives guidance in such matters as recognizing symptoms, dealing with behavior problems, beginning retraining in speech and understanding and testing progress.

SILK SCREEN PRINTING

James Eisenberg

McKnight & McKnight, 1952 54 pp., \$1.25

A book devoted to silk screen as pertains to poster work or printing which might be of value to occupational therapists. Unfortunately no directions are given for printing on cloth which would make the booklet more instructive for all occupational therapy departments.

CARVING ANIMAL CARICATURES

Elma Waltner

McKnight & McKnight, 1951 104 pp., \$1.50

This booklet contains over two dozen designs for carving animal caricatures. Each step in the process of preparing and carving the caricature is clearly illustrated necessitating a minimum of written directions.

HOW TO HELP OLDER PEOPLE

Julietta K. Arthur

J. B. Lippincott Co., Philadelphia

1954 \$4.95, 383 pp.

An excellent book, interestingly written, of the problems of growing old and how they should be met. It is a practical book that will be an excellent reference for therapists.

In addition to the detailed discussions of ways to help and understand older people, the book contains excellent appendices of useful information on special services, rehabilitation centers, job opportunities, recommended hospitals and estimated costs of chronic illnesses. A complete book that will prove of value to anyone advising or treating people with chronic illnesses or the aged.

PHYSICAL MEDICINE AND REHABILITATION FOR THE CHRONICALLY ILL

Frank H. Krusen, M.D.

Journal of the American Geriatrics Society

Vol. II, No. 2, Feb., 1954

Reviewed by: Caroline G. Thompson, O.T.R.

Dr. Krusen, who is chairman of the section of physical medicine and rehabilitation at Mayo Clinic, Rochester, Minn., initiates his description of the value of physical medicine and rehabilitation services by a reference to the interesting material on the problems of chronic illness uncovered in the five volume *Report of the President's Commission on the Health Needs of the Nation*. He goes on to support Dr. Henry Kessler's view of rehabilitation as a "creative process in which the remaining physical and mental capacities of the handicapped are utilized and developed to their highest efficiency." He reminds us that the extension of life through modern medical discoveries has conferred an equivalent responsibility on all of us to see to it that the lives thus saved are not unbearable

through hopelessness and dependency. Disease he cites as by far the most frequent cause of severe disabling, and mentions a book written by twelve physicians about their own severe illnesses, in which each emphasizes the importance of the psychological and social effects of their illness upon themselves.

Dr. Krusen recommends a dynamic program to counter the traditional attitude of acceptance and neglect. He touches on current facilities and recommends assigning twenty percent of the beds of general hospitals to the physical medicine and rehabilitation service, explaining this would result in a saving to the community as well as to the disabled individual.

His restatement of the problem and our current means of meeting it, together with his enthusiastic comments about the potential results of adequate services, will interest those concerned in rehabilitation.

SHOULDER-HAND SYNDROME FOLLOWING HEMIPLEGIA

Daniel M. Swan, M.D.

Neurology

Vol. 4, No. 6, June, 1954

Reviewed by: Caroline G. Thompson, O.T.R.

Dr. Swan, who is associated with the department of medicine in the City Hospital, Quincy, Mass., discusses in his article a syndrome which frequently occurs as a complication following cerebro-vascular accidents, and a treatment which he has found successful. This is a painful disability of the upper extremity, due to disturbance of the sympathetic nerve supply. The duration of the condition varies from weeks to years. Pain and limitation of motion in the shoulder joint is combined with swelling, color changes, pain and stiffness in the fingers and the hand. If unrelieved, contractures may develop in the hand, along with atrophy of subcutaneous tissue, trophic changes in the skin and osteoporosis of the bones of the hand.

Earlier writers quoted by Dr. Swan have suggested that the vascular lesion which interferes with motor function may also affect the control of the autonomic nervous system. Procedures for correction and relief that have been used are orthopedics, physical therapy, radiation, surgery (sympathectomies) and the procaine block. Dr. Swan describes the disabilities and progress of three patients treated by the latter method and concludes that it results in prompt relief of pain, and usually in improvement of the disability. The block is administered to the stellate ganglia, using the anterior approach. In one case of recurrent difficulties, a series of treatments restored the patient to his job as a mechanic, using fine finger motions.

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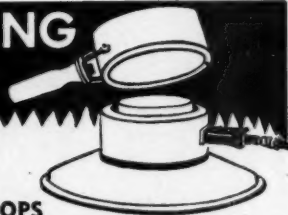
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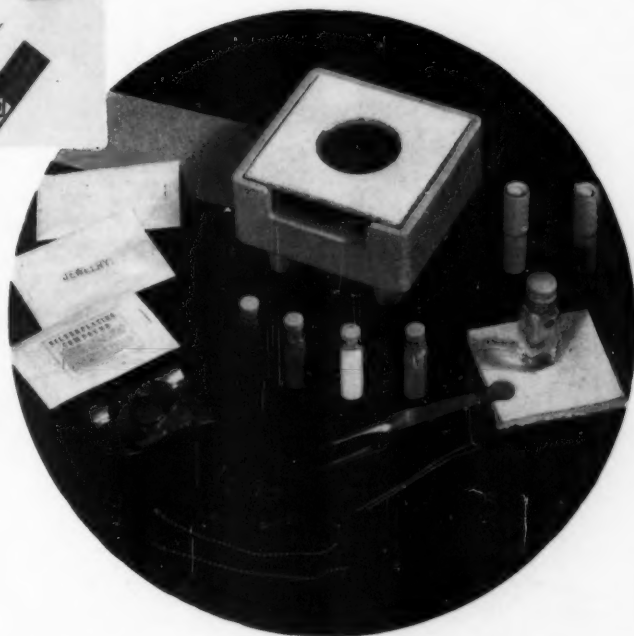
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